G-7

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL–TRANSIT PERMIT No. _____

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Full name of deceased Theodore John Rawson Date of death Feb28 2004

Place of death Ingham (County) Mason (Township or village or city) Sex M Date of birth 02/08/1921

Cause of death _____

Method of disposal Burial (Whether burial, cremation, storage, etc.) Woodlawn Cemetery (Cemetery of cremetory) Veteran? Yes (Yes or No)

APPROVED FOR CREMATION County Eaton State MI

Signature of Medical Examiner _____ Date _____ 20____

A certificate of death having been filed as required by the laws or regulations of this state, permission is hereby given to R. Raymond Rossell (Funeral director or person acting as such) Address 401 W. Seminary Street Charlotte to dispose of body of said deceased.

Signature R. Raymond Rossell Date 3/2/04 20____

(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMETORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried (State whether cremated, buried, stored, etc.) on Mar 2 20 04 in Woodlawn Cemetery (Cemetery or cremetory)

Place Vermontville, Mich. Signature John Rathbun (Sexton or person in charge)

This permit must be endorsed by the sexton *(or by the funeral director or Mortuary Science licensee where there is no sexton).*

(OVER)

DCH-0490A (5/02) Authority: Act 368 of 1978 and Act 299 of 1980

stored 3/2/04 plot G. lot 7