MAY-06-2005 08:59 FROM COOK FAMILY SERVICES TO KOOPS

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

F-32

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Division for Vital Records

Full name of deceased: Louise Jean Baker   Date of death: May 3 20 05

Cause of death: Cardiorespiratory failure

Place of death: Kent (County)   Grand Rapids (Township or village or city)   Veteran? No (Yes or No)   Sex F   Age 76

Method of disposal: Cremation (Whether burial, cremation, removal, etc.)   Myrtle Park Crematorium (Cemetery or crematory)

County Kent   State MI

APPROVED FOR CREMATION

Signature of Medical Examiner: [signature] MD   Date May 6 20 05

A certificate of death having been filed as required by the laws or regulations of this state, permission is hereby given

to Koops Funeral Chapels (Funeral director or person acting as such)   Address 935 Fourth Ave, Lake Odessa, MI 48849

to dispose of body of said deceased.

Signature ______ (Check one: ☐ Registrar. ☐ Funeral Director. ☐ Mortuary Science Licensee)   Date ______ 20 __

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Cremated ashes buried (State whether cremated, buried, stored, etc.) on May 10 20 05 in Woodlawn Cemetery (Cemetery or crematory)

Place: Vermontville, Mi   Signature: [signature] (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)   Plat F Lot 32

DCH-[illegible] Act 368 of 1978 and Act 290 of 1980