

BURIAL—TRANSIT PERMIT No. _____
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Full name of deceased Helen Mae Hughes Date of death September 03, 2005

Place of death Calhoun Marengo Twp. Sex F Date of birth June 21, 1919
(County) (Township or village or city)

Cause of death _____

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

APPROVED FOR CREMATION

Signature of Medical Examiner _____ County Eaton State MI Date _____

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

to Craig K. Kempf Funeral Home Address 103 E. Mansion St., Marshall, MI 49068,

to dispose of body of said deceased. (Funeral director or person acting as such)

Signature [Signature] Date September 04, 2005
(Check one: ☐ Registrar, ☒ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried on Sept 6 20 05 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.) (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).