

BURIAL-TRANSIT PERMIT

No. _____

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Full name of deceased Dorothy Ellen Carpenter Date of death June 5 2005

Place of death Eaton Charlotte Sex F Date of birth 08/29/1932
(County) (Township or village or city)

Cause of death Mestatic Cancer, probably lung

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

County Eaton State MI

APPROVED FOR CREMATION

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 J. Ernest Pray Address 401 W. Seminary Street Charlotte
(Funeral director or person acting as such)

to dispose of body of said deceased.

Signature _____ Date June 8 2005
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on June 8 2005 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.)

Place Woodlawn Cemetery Signature John Gathen
(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) Plot J lot 28

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION