

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL -TRANSIT PERMIT
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

No. _____

Full name of deceased Lila Estella Green Date of death Jan 2 2006

Place of death Eaton Charlotte Sex F Date of birth 03/30/1919
(County) (Township or village or city)

Cause of death Emphysema

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)

Signature Joseph E. Pray Date June 05 2006
(Check one: ☐ Registrar, ☐ Funeral Director, ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on *ba 0 20 20 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Woodlawn, MI Signature John Gathman
(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).

STOKED 1-5-06 (OVER) Sheet F Lot 71