

BURIAL- TRANSIT PERMIT
MICHIGAN DEPARTMENT OF PUBLIC HEALTH
Office of the State Registrar and Center for Health Statistics

No. _____

Full name of deceased Agnes M. Lake Date of death Sep 7, 2007

Place of Death Barry Maple Grove Sex F Date of birth May 10, 1918
(County) (Township or village or city)

Cause of death Drowning

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

County Eaton State MI

APPROVED FOR CREMATION

Signature of Medical Examiner _____ Date _____

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

to Daniels Funeral Home Address 9200 E M79 Highway
to dispose of said body. Nashville, MI 49073

Signature [Signature] Date 9-11-07
(Check one: ☐ Registrar. ☐ Funeral Director ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUR SPACE BELOW

Body was Burial on Sept 12 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.) (cemetery or crematory)

Place Vernonville, MI Signature John P. 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) Plot J lot 15

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION