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TEXAS STATE DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS

BURIAL--TRANSIT PERMIT

PERMIT
NUMBER

4127

PERSONAL DATA ON DECEASED	1. Full name of deceased Alice C. Hammond Knowles	2. Date of death (month, day, and year) Oct. 31, 1961	3. Death due to communicable disease YES ☐ NO ☒
MANNER AND PLACE OF DISPOSAL	4. Sex Female	5. Color or race White	6. Age in years 79
	Method of disposal Burial ☒ Removal ☐	Cremation ☐ Disinterment ☐	
	Name of funeral director Lelon Gude		
AUTHORIZA- TION TO DISPOSE OF BODY	Name of embalmer (if none, write none) L. E. Williams	7. Place of death SAN ANTONIO	(city or precinct no.) BEXAR
		Place of burial (name of cemetery or crematorium) Alamo Funeral Home	(city or town) Vermontville, Michigan
DISPOSITION OF BODY	Signature of local registrar Innocent Gierman	District SAN ANTONIO	Date NOV 1 1961
	Body was Buried ☒ Cremated ☐	Name of cemetery or crematory Woodlawn Cem.	Name of sexton or person in charge Wally Aldrich

Widowed