

B-49
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BURIAL — TRANSIT PERMIT
MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Erna Jensen No. _____
Cause of death Acute Coronary Arteriosclerosis
Place of death Barry Castleton
(County) (Township or village or city)
Date of death April 23rd 1962 Race White Sex male Age 58
Method of disposal Burial
(Whether burial, cremation, storage, etc.)
County Caton State Michigan (Cemetery or crematory)

A certificate of death or stillbirth having been filed as required by the laws or regulations of this state, permission is hereby given to West Funeral Home Address Nashville, Mich.
(Funeral director or person acting as such)
to dispose of body of said deceased.
Signature Geo. H. Vogt Date 4/27 1962
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on 4-29 1962 in Woodlawn Cemetery
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)
Place Nashville, Mich. Signature Valley Gilbrech (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) and returned within seven days to the registrar of the district in which the burial takes place.
(OVER)

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION