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THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL — TRANSIT PERMIT

MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Carrie May Weeks No.

Cause of death Acute Congestive Heart Disease

Place of death Eaton (County) Charlotte (Township or village or city)

Date of death 3/16/1964 19 Race White Sex F Age 81

Method of disposal Burial (Whether burial, cremation, storage, etc.) Woodlawn Cemetery (Cemetery or crematory)

County Eaton State Michigan

A certificate of death or stillbirth having been filed as required by the laws or regulations of this state, permission is hereby given to George H Vogt (Funeral director or person acting as such) Address Nashville, Michigan to dispose of body of said deceased.

Signature Robert N Lake Date 3/19/64

(Check one: ☒ Registrar, ☐ Funeral Director, ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried (State whether cremated, buried, stored, etc.) on March 19, 1964 in Woodlawn (Cemetery or crematory)

Place Vermontville Signature Lowell Hallwill (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)