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BURIAL — TRANSIT PERMIT
MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Jill L. Aldrich No. _____
Cause of death Leukemia (Monocytic)
Place of death Ingham Lausing
(County) (Township or village or city)
Date of death Jan. 16, 19 64 Race White Sex Female Age 5
Method of disposal Burial Woodlawn
(Whether burial, cremation, storage, etc.) (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 Vogt Funeral Home Address Vermontville, Mich.
(Funeral director or person acting as such)
to dispose of body of said deceased.

Signature Macee M. Baeuer Date Jan 17, 19 64
(Check one: ☒ Registrar, ☐ Funeral Director, ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was buried on Jan. 21, 19 64 in Woodlawn
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)
Place Vermontville Signature L. Farrell
(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