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THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL — TRANSIT PERMIT

MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Ernest D. LaFleur No.

Cause of death Cerebral Thrombosis

Place of death Charlotte, Mich. (Township or village or city) Eaton (County) Hayes Green Beach Hospital

Date of death 4-29-65 19 Race White Sex M Age 74

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 (Funeral director or person acting as such) Address

to dispose of body of said deceased.

Signature Joyce Borgman Date April 30 1965

(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 May 3, 1965 in Woodlawn (Cemetery or crematory)

Place Vermontville Signature Russell H. Powell (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)