

0-71

BURIAL — TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

Full name of deceased Agnes Garinger No. _____
Cause of death Cerebral Hemorrhage
Place of death Eaton (County)
Date of death December 18 1966 Race White Sex Female Age 75
Method of disposal Burial
County Eaton (Whether burial, cremation, storage, etc.) 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 Geo. H. Vogt Address Marquette, Mich.
(Funeral director or person acting as such)

to dispose of body of said deceased.

Signature Geo. H. Vogt Date 12-20 - 1966
(Check one: ☐ Registrar, ☒ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was examined on Dec 21 1966 in Marquette
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Marquette Signature Lowell H. Hall (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)