

BURIAL — TRANSIT PERMIT
MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Vern Rawson No. 2034

Cause of death Acute Respiratory Distress

Place of death Kent Grand Rapids, Michigan
(County) (Township or village or city)

Date of death October 23, 19 66 Race White Sex Male Age 66

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

County Vermontville 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 Myron E. Pray Address Charlotte, Michigan
(Funeral director or person acting as such)

to dispose of body of said deceased.

Signature [Signature] Date October 24, 19 66
(Check one: ☐ Registrar, ☐ Funeral Director, ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Assailed on Oct 24 19 66 in Woodlawn
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Vermontville Signature [Signature] (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