G-82
E 1/2

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased William D. Foster No.

Cause of death Basil Skull fracture

Place of death Eaton (County) Kalamo (Townshp or village or city)

Date of death 2-5 1966. Race White Sex Male Age 64

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

County Eaton State Mich

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 (Funeral director or person acting as such) Address Nashville, Mich

to dispose of body of said deceased.

Signature George H. Vogt Date 2-8 1966

(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 Feb 8 1966 in Woodlawn (Cemetery or crematory)

Place Hermenitage Signature Lowell Hartsuff (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)