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THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Leota Mae Foster No.

Cause of death Massive Gastric Hemorrhage

Place of death Ingham (County) Lansing Township (Township or village or city)

Date of death Feb. 12 1966. Race White Sex Female Age 53

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 Voght Funeral Home (Funeral director or person acting as such) Address Nashville Mich to dispose of body of said deceased.

Signature Geo. H. Voght Date 2-15 1966

(Check one: ☐ Registrar, ☐ Funeral Director, ☑ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Vault on Feb. 15 1966 in Woodlawn

(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Nashville Signature Ferrell Hallsell

(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)