

BURIAL—TRANSIT PERMIT
MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased MERLIN WARD RICH No. _____

Cause of death Cerebral Hemorrhage

Place of death Eaton (County) Charlotte
(Township or village or city)

Date of death February 16 1967 Race White Sex Male Age 77

Method of disposal Burial Woodlawn Cemetery
(Whether burial, cremation, storage, etc.) (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 Joseph E. Pray Address 401 W. Seminary, Charlotte, Mich.
(Funeral director or person acting as such)

to dispose of body of said deceased.

Signature _____ Date Feb. 18 1967
(Check one: ☐ Registrar, ☐ Funeral Director, ☒ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was _____ on Feb. 18 1967 in Woodlawn
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Woodlawn Signature Joseph E. Pray
(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