

BURIAL — TRANSIT PERMIT

MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased *Richard Jenkins* No. _____

Cause of death *Myocardial infarction*

Place of death *Vermonton* (Township or village or city)

Date of death *2-10-68* Race *White* Sex *Male* Age *65*

Method of disposal *Buried* (Whether burial, cremation, storage, etc.)

County *Eaton* 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 *George H. Vogt* (Funeral director or person acting as such) to dispose of body of said deceased.

Signature *George H. Vogt* Date *2-12-68* Mortuary Science Licensee

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

CEMETERY OR CREMATORIUM AUTHORITY SHALL FILL OUT SPACE BELOW

Body was *cremated* on *Feb 12 1968* in *Woodhaven* (State whether cremated, buried, stored, etc.)

Place *Vermonton* (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 section*) 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