D-45

BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

Full name of deceased Alice M. Adamy No.

Cause of death Acute Coronary Occlusion

Place of death Osceola (County) Marion (Township or village or city)

Date of death Aug 12 19 69. Race white Sex female Age 63

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

County ~~Ingham~~ Eaton State Michigan

A certificate of death or fetal death having been filed as required by the laws or regulations of this state, permission is hereby given to Howard B. Fosnaught (Funeral director or person acting as such) Address Marion Michigan to dispose of body of said deceased.

Signature Howard B Fosnaught Date 8-12-1969 19

(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 Aug 15 1969 in Woodlawn (Cemetery or crematory)

Place Vermontville Signature Lowell Hallwill (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)