

All Permits will be issued by the Secretary, and must be paid for in advance. No burial allowed without a permit

APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

No. 706

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Grant R. Calvert _____

Place of Nativity _____ Ind. _____

Date of Birth _____ July 27, 1897 _____

Date of Decease _____ July 23, 1964 _____

Age _____ 67 _____

Occupation _____ Barber _____

Single, Married or Widowed _____ Married _____

Late Residence _____ Rising Sun, Ind. _____

Disease _____ Complications _____

Place of Death _____ Christ Hospital Cin. Ohio _____

Parents' Name _____ George Calvert _____

Size of Coffin or Box, Length _____ Feet _____ In. Width _____ Feet _____ In.

In whose Lot to be Interred _____ Lot I74 S.H. Sec. D No. Grave 3

Removed from _____

Name of Undertaker _____ Detmer Cement box _____

Permit applied for by _____