

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. 960

Rising Sun, Ind., March, 8, 1993

Name of Deceased Pauline J. Combs

Place of Nativity _____

Date of Birth _____

Date of Decease March, 4, 1993

Age 85

Occupation _____

Single, Married or Widowed _____

Late Residence Madison Nursing Home

Disease _____

Place of Death Madison County - Jefferson State - IN.

Parents' Name _____

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

In whose Lot to be Interred Pauline Combs Sec. F-Row-7 No. Grave-35

Removed from _____

Name of Undertaker Lytle-Gans-Andrews

Permit applied for by _____

FUTURE
MAUS. ~~TOP~~
~~5/16~~