

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. 1152

Rising Sun, Ind., \_\_\_\_\_, 19\_\_

Name of Deceased \_\_\_\_\_ Mrs. Emma Detmer \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Ohio Co., Ind. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Dec. 9, 1880 \_\_\_\_\_

Date of Decease \_\_\_\_\_ April 19, 1964 \_\_\_\_\_

Age \_\_\_\_\_ 83 \_\_\_\_\_

Occupation \_\_\_\_\_ Housekeeper \_\_\_\_\_

Single, Married or Widowed \_\_\_\_\_ Widowed \_\_\_\_\_

Late Residence \_\_\_\_\_ Madison, Ind. \_\_\_\_\_

Disease \_\_\_\_\_

Place of Death \_\_\_\_\_ Madison State Hospital Madison, Ind. \_\_\_\_\_

Parents' Name \_\_\_\_\_ Chris Sachleben \_\_\_\_\_

Size of Coffin or Box, Length \_\_\_\_\_ Feet \_\_\_\_\_ In. \_\_\_\_\_ Width \_\_\_\_\_ Feet \_\_\_\_\_ In.

In whose Lot to be Interred \_\_\_\_\_ Lot 154 W.H. \_\_\_\_\_ Sec. B \_\_\_\_\_ No. Grave 4 \_\_\_\_\_

Removed from \_\_\_\_\_

Name of Undertaker \_\_\_\_\_ Detmer \_\_\_\_\_ Mausoleum \_\_\_\_\_

Permit applied for by \_\_\_\_\_