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 1431 Rising Sun, Ind.,_____, 19___ Name of Deceased _____George_Elbreght Place of Nativity ____ Ohio Co. Ind. Date of Birth _____May 30, I886 Date of Decease _____June 15, 1946-----Age _____60yrs I5 days Occupation ____Farming Single, Married or Widowed ____Single Late Residence ____Ohio Co Ind Disease ______ Carcinoma _____ Place of Death ____Residence____ Parents' Name William Elbrecht & Flicabeth Schalle Size of Coffin or Box, Length _____Feet____In. Width____Feet____In. In whose Lot to be Interred _____ Lot 96 ____ Sec. B ____ No. Grave 6 Removed from _____ Name of Undertaker _______Detmer Permit applied for by _____