

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. 1533

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Jacob Joseph Fessler _____

Place of Nativity _____ Cin. Ohio _____

Date of Birth _____ Jan. 14, 1882 _____

Date of Decease _____ Aug. 6, 1957 _____

Age _____ 75 _____

Occupation _____ Retired Salesman _____

Single, Married or Widowed _____ Married _____

Late Residence _____ Rising Sun, Ind. _____

Disease _____ Carcinoma of liver _____

Place of Death _____ Rising Sun, Ind. _____

Parents' Name _____ Charles Fessler _____

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

In whose Lot to be Interred _____ Lot 175 _____ Sec. B _____ No. Grave 2 _____

Removed from _____ _____

Name of Undertaker _____ Detmer _____ Mes _____ Mausoleum cap
with permacrete vault

Permit applied for by _____ _____