## APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

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	/	4	0	5
NO	/			

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		Rising Sur	n, Ind.,			, 19	
Name of Deceased	Ellen Hal	1					
Place of Nativity							
Date of Birth							
Date of Decease	9-27-1922	3					
AgeII							
Occupation							
Single, Married or Widowed							
Late Residence							
Disease							
Place of Death							
Parents' Name							
Size of Coffin or Box, Length	F	eet	_In.	Width	Feet	In.	
In whose Lot to be Interred _	I	ot_5I	s.H.	_ SecB	No	Grave-3-	
Removed from							
Name of Undertaker		Stee	le				
Permit applied for by							