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. 1986
Name of Deceased And F James
Place of Nativity
Date of Birth
Date of Decease nov. 30 - 1874.
Age <u>le H</u> ,
Occupation
Single, Married or Widowed
Single, Married or Widowed Late Residence
Disease
Disease Place of Death _ Elkhart Ind: _ Lineral Hospital '
Parents' Name
Size of Coffin or Box, LengthFeetIn. WidthFeetIn.
Size of Coffin or Box, Length FeetIn. Width FeetIn. In. Width FeetIn. In. In whose Lot to be Interred I. J. J. J. J. Sec. A No. grave b
Removed from
Permit applied for by

4
