APPLICATION FOR BURIAL PERMIT

No. 107 THE RISING SUN CEMETERY Rising Sun, Ind.,____, 19___, Name of Deceased ____Bavid Bailey Place of Nativity Date of Birth Date of Decease _____9-17-1916______ Age _____73_____ Occupation _____ Single, Married or Widowed ______ Late Residence ______ Disease ______ Place of Death _____ Parents' Name _____ Size of Coffin or Box, Length _____Feet____In. Width_____Feet____In. In whose Lot to be Interred _____ Single grave ____ Sec.Plat A ____ No. grave 52_ Removed from ______ Name of Undertaker Permit applied for by _____