

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. 227

Rising Sun, Ind., 12-12, 1995

Name of Deceased Elizabeth E. Barres

Place of Nativity _____

Date of Birth _____

Date of Decease 12-9-95

Age 66

Occupation _____

Single, Married or Widowed _____

Late Residence _____

Disease _____

Place of Death Kettering Medical Cntr.

Parents' Name _____

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

In whose Lot to be Interred _____ Sec. D No. 178 N.E. 1/6

Removed from _____

Name of Undertaker Tobias Funeral Home
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Permit applied for by _____