

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. 2637

Rising Sun, Ind., _____, 19__

Name of Deceased Doc. Lamkin

Place of Nativity _____

Date of Birth _____

Date of Decease Reinternment 8-21-1914

Age _____

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 _____ Lot 60 Sec. A No. grave I

Removed from _____

Name of Undertaker _____

Permit applied for by _____