APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

No. 364

		THE RISING DON CEMELENT				 140,		
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Name of Deceased	Susan	Flac	kburn			 		
Place of Nativity						 		
Date of Birth						 		
Date of Decease								
Age	56 					 		
Occupation						 		
Single, Married or Wi								
Late Residence						 		
Disease						 		
Place of Death					- -	 		
Parents' Name						 		
Size of Coffin or Box,								
In whose Lot to be Int								
Removed from						 		
Name of Undertaker						 		
Permit applied for by						 		