

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. 4625

Rising Sun, Ind., \_\_\_\_\_, 19\_\_

Name of Deceased \_\_\_\_\_ Dorothy Elizabeth Vornheder \_\_\_\_\_

Place of Nativity \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Decease \_\_\_\_\_ 4-II-1939 \_\_\_\_\_

Age \_\_\_\_\_ 69 \_\_\_\_\_

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 I20 \_\_\_\_\_

Removed from \_\_\_\_\_

Name of Undertaker \_\_\_\_\_ Detmer \_\_\_\_\_ stone vault \_\_\_\_\_

Permit applied for by \_\_\_\_\_