

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. 4646

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

Name of Deceased \_\_\_\_\_ Francis Arthur Wallace \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Dearborn Co. Ind. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Feb. 17, 1924 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Aug. 22, 1959 \_\_\_\_\_

Age \_\_\_\_\_ 35 \_\_\_\_\_

Occupation \_\_\_\_\_ Laborer \_\_\_\_\_

Single, Married or Widowed \_\_\_\_\_ Married \_\_\_\_\_

Late Residence \_\_\_\_\_ Aurora, Ind. Johnson St. \_\_\_\_\_

Disease \_\_\_\_\_ Pending \_\_\_\_\_

Place of Death \_\_\_\_\_ Dearborn Co. Hospital \_\_\_\_\_

Parents' Name \_\_\_\_\_ Clifford & Pauline Barrows Wallace \_\_\_\_\_

Size of Coffin or Box, Length \_\_\_\_\_ Feet \_\_\_\_\_ In. Width \_\_\_\_\_ Feet \_\_\_\_\_ In.

In whose Lot to be Interred \_\_\_\_\_ Lot I4 \_\_\_\_\_ Sec. D.R. \_\_\_\_\_ No. Grave I \_\_\_\_\_

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

Name of Undertaker \_\_\_\_\_ Humphrey \_\_\_\_\_ Permacrete vault \_\_\_\_\_

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