APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

No. 4683

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Name of Deceased	Anthony Walton		
Place of Nativity	Lawrenceburg, Ind.		
Date of Birth	_Aug3I_,_1966		
Date of Decease	Sept. I, 1966		
Age6_Hours_			
Occupation			
Single, Married or Widowed _			
Late Residence DiseasePremature			
Place of DeathDeat Parents' NameScott &	rb orn - Go Hospital & Carolyn Walton		
Size of Coffin or Box, Length	FeetIn.	Width	_FeetIn.
In whose Lot to be Interred Removed from		SecB	No. Grave 2
Name of Undertaker			
Permit applied for by			