APPLICATION FOR BURIAL PERMIT

No. 701 THE RISING SUN CEMETERY Rising Sun, Ind.,_____ 19___ 19___ Name of Deceased _____America Byran Place of Nativity ______ Date of Birth Age _____90 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._____No._____ Removed from _____ Name of Undertaker ______Williams wood box Permit applied for by ______