

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. 19

Name of Deceased _____ Rising Sun, Ind., _____, 19____
John Bascom Adams

Place of Nativity _____ Owen Co. Ky. _____

Date of Birth _____ June 13, 1881 _____

Date of Decease _____ Feb. 15, 1953 _____

Age _____ 71-8-2 _____

Occupation _____ Retired laundry operator _____

Single, Married or Widowed _____ Married _____

Late Residence _____ New Albany, Ind. _____

Disease _____ Labor Pneumonia _____

Place of Death _____ St. Edwards Hospital New Albany, Ind. _____

Parents' Name _____ James & Betty Thomas Adams _____

Size of Coffin or Box, Length _____ Feet _____ In. Width _____ Feet _____ In.

In whose Lot to be Interred _____ Lot 229 _____ Sec. D _____ No. Grave 3 _____

Removed from _____

Name of Undertaker _____ Humphrey Airseal vault _____

Permit applied for by _____