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	THE RISING SUN CEMETERY		No. 36	
	Rising Sun, Ind.	- }	, 19	
Name of DeceasedCharles_O	evin Akers			
Place of Nativity				
Date of Birth				
Date of Decease2=18-1915				
Age5				
Occupation				
Single, Married or Widowed				
Late Residence				
Disease				
Place of Death				
Parents' Name				
Size of Coffin or Box, Length	FeetIn.	Width	FeetIn.	
In whose Lot to be Interred	Lot I3	SecA	No. grave I	
Removed from				
Name of UndertakerSte	eele			
Permit applied for by				