

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. 45

Rising Sun, Ind., 7-12, 1984

Name of Deceased

Michael Alford

Place of Nativity

Dearborn Co. Hosp.

Date of Birth

7-30-1964

Date of Decease

7-9-1984

Age

19

Occupation

Single, Married or Widowed

Last Residence

High st Rising Sun

Disease

Place of Death

Dearborn Co. Hospital

Parents' Name

Donald + Patricia (Lestatter) Alford

Size of Coffin or Box, Length

Feet

In

Width

Feet

In

In whose Lot to be Interred

Michael Alford Sec. F Row 8 No. grave 30

Removed from

Name of Undertaker

Humphrey - Foyler

Permit applied for by

Fred R Foyler

Top Seal