## APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY Rising Sun, Ind.,\_\_\_\_\_ 19\_\_\_ 19\_\_\_ Thomas Willard Ashcraft Name of Deceased \_\_\_\_\_ Place of Nativity \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Decease \_\_\_\_\_Mar. 23. 1939-----7 days Age \_\_\_\_\_ Occupation \_\_\_\_\_ Single, Married or Widowed Late Residence Disease \_\_\_\_\_\_ Place of Death \_\_\_\_\_\_ Everett & Mary Ashcraft Size of Coffin or Box, Length \_\_\_\_\_Feet\_\_\_\_In. Width\_\_\_\_Feet\_\_\_\_In. In whose Lot to be Interred \_\_\_\_\_ Lot I38 E.H. Sec. B. No. Grave I Removed from \_\_\_\_\_\_ Name of Undertaker \_\_\_\_\_Steele wood box Permit applied for by \_\_\_\_\_