

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. 1484

Rising Sun, Ind., \_\_\_\_\_, 19\_\_

Name of Deceased \_\_\_\_\_ Dr. Eugene S. Espey \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Jan. 7, 1872 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Dec. 4, 1948 \_\_\_\_\_

Age \_\_\_\_\_ 76-10-28- \_\_\_\_\_

Occupation \_\_\_\_\_ Retired Dentist \_\_\_\_\_

Single, Married or Widowed \_\_\_\_\_ Married \_\_\_\_\_

Late Residence \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Disease \_\_\_\_\_ Coronary Thrombosis \_\_\_\_\_

Place of Death \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Parents' Name \_\_\_\_\_ Hugh Espey \_\_\_\_\_

Size of Coffin or Box, Length \_\_\_\_\_ Feet \_\_\_\_\_ In. Width \_\_\_\_\_ Feet \_\_\_\_\_ In.

In whose Lot to be Interred \_\_\_\_\_ Lot 110 \_\_\_\_\_ Sec. A \_\_\_\_\_ No. Grave I \_\_\_\_\_

Removed from \_\_\_\_\_

Name of Undertaker \_\_\_\_\_ Detmer \_\_\_\_\_ wood box \_\_\_\_\_

Permit applied for by \_\_\_\_\_