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. 1497

	Rising Sun	, Ind.,_			_, 19
Name of Deceased	Robert H. Es	p ey			
Place of Nativity					
Date of Birth					
Date of Decease	12-25-1957				
Age69					
Occupation					
Single, Married or Widowed					
Late Residence					
Disease					
Place of Death					
Parents' Name					
Size of Coffin or Box, Length	Feet	_In.	Width	Feet	In.
In whose Lot to be Interred	Lot 83		SecA	NoGrav	e_4
Removed from					
Name of Undertaker					
Permit applied for by					