## APPLICATION FOR BURIAL PERMIT

## THE RISING SUN CEMETERY

No. 2033

	Rising	Sun,	Ind.,	, 19
Name of Deceased	Jot Hastings			
Place of Nativity				
Date of Birth				
Date of Decease				
Age				
Occupation				
Single, Married or Widowed .	Married			
Late ResidenceCanaan	_ X			
Disease	* 1			
Place of Death				
Parents' Name				
Size of Coffin or Box, Length				
In whose Lot to be Interred				
Removed from			<b></b>	
			Stone vault	
Permit applied for by				