

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. 2203

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Ada Hoeferkamp _____

Place of Nativity _____

Date of Birth _____

Date of Decease _____ 8-12-1935 _____

Age _____ 52 _____

Occupation _____ Housekeeper _____

Single, Married or Widowed _____ Married _____

Late Residence _____ Rising Sun, Ind. _____

Disease _____

Place of Death _____ Cin. Ohio Hospital _____

Parents' Name _____ Phillip Wessler _____

Size of Coffin or Box, Length _____ Feet _____ In. Width _____ Feet _____ In.

In whose Lot to be Interred _____ Lot II _____ Sec. B _____ No. Grave 2 _____

Removed from _____

Name of Undertaker _____ Williams _____

Permit applied for by _____