

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. 2278

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Adelia Siekman Humphrey _____

Place of Nativity _____ Ohio Co. Ind. _____

Date of Birth _____ June 20, 1902 _____

Date of Decease _____ Nov. 22, 1953 _____

Age _____ 51-5-2 _____

Occupation _____ Housekeeper _____

Single, Married or Widowed _____ Married _____

Late Residence _____ 231 McCarmic Place, Cⁿ. O. _____

Disease _____

Place of Death _____ Deaconess Hospital _____

Parents' Name _____ Will F. & Minnie (Wessler) Siekman _____

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

In whose Lot to be Interred _____ Lot 85 _____ Sec. A _____ No. Grave 7 _____

Removed from _____

Name of Undertaker _____ Humphrey _____ Stone vault _____

Permit applied for by _____