APPLICATION FOR BURIAL PERMIT

THE RISING SU	N CEMETERY	No. 2856
Name of Deceased Carole Washnack M	in, Ind., 6-21	, XD12
Place of Nativity		
Date of Birth	·	
Date of Decease		
Age		
Occupation		
Single, Married or Widowed		
Late Residence		
Disease		
Place of Death		
Parents' Name		
Size of Coffin or Box, LengthFeet	In. WidthFee	et
Size of Coffin or Box, LengthFeet In whose Lot to be Interred	Sec. <u>- East</u> N	o. Rouf - 6
Removed from		
Name of Undertaker		
Permit applied for by		