

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. 2969

Rising Sun, Ind., _____, 19__

Name of Deceased _____ William Gillispi Monroe _____

Place of Nativity _____ Ohio Co., Ind. _____

Date of Birth _____ 12 _____

Date of Decease _____ May 27, 1946 _____

Age _____ 64 -I-26 _____

Occupation _____ Farmer _____

Single, Married or Widowed _____ Divorced _____

Late Residence _____ Rising Sun, Ind. _____

Disease _____ Cerebral Hemorrhage _____

Place of Death _____ Whitlatch Clinic, Milan, Ind. _____

Parents' Name _____ Jesse Monroe & Ella Miles Monroe _____

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

In whose Lot to be Interred _____ Lot 126 _____ Sec. A _____ No. Grave I _____

Removed from _____

Name of Undertaker _____ Humphrey & Phillips _____

Permit applied for by _____