

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. 3099

Rising Sun, Ind., \_\_\_\_\_, 19\_\_

Name of Deceased \_\_\_\_\_ Ethel Rollins McHenry \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Dec. II, 1892 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Feb. 23, 1945 \_\_\_\_\_

Age \_\_\_\_\_ 52-2-12 \_\_\_\_\_

Occupation \_\_\_\_\_ Telephone exchange operator \_\_\_\_\_

Single, Married or Widowed \_\_\_\_\_ Widowed \_\_\_\_\_

Late Residence \_\_\_\_\_ Lawrenceburg, Ind. \_\_\_\_\_

Disease \_\_\_\_\_ Diabetes \_\_\_\_\_

Place of Death \_\_\_\_\_ Residence \_\_\_\_\_

Parents' Name \_\_\_\_\_ Benjamin & Ida Todd McHenry \_\_\_\_\_

Size of Coffin or Box, Length \_\_\_\_\_ Feet \_\_\_\_\_ In. Width \_\_\_\_\_ Feet \_\_\_\_\_ In.

In whose Lot to be Interred \_\_\_\_\_ Lot 50 \_\_\_\_\_ Sec. B \_\_\_\_\_ No. Grave I \_\_\_\_\_

Removed from \_\_\_\_\_ \_\_\_\_\_

Name of Undertaker \_\_\_\_\_ Stier & Williams \_\_\_\_\_ wood box \_\_\_\_\_

Permit applied for by \_\_\_\_\_ \_\_\_\_\_