

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. 3461

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

Name of Deceased \_\_\_\_\_ Fred Samuel Perkins \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Ky. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Aug. 3, 1887 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Dec. 8, 1967 \_\_\_\_\_

Age \_\_\_\_\_ 80-3-2907 \_\_\_\_\_

Occupation \_\_\_\_\_ Farmer \_\_\_\_\_

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

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

Disease \_\_\_\_\_

Place of Death \_\_\_\_\_ Lawrenceburg, Ind. \_\_\_\_\_

Parents' Name \_\_\_\_\_ James A. Perkins & Sarah Martin \_\_\_\_\_

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

In whose Lot to be Interred \_\_\_\_\_ Lot 19 E.H. \_\_\_\_\_ Sec. B \_\_\_\_\_ No. Grave 4 \_\_\_\_\_

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

Name of Undertaker \_\_\_\_\_ Moon \_\_\_\_\_ Airseal \_\_\_\_\_

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