

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. 3659

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

Name of Deceased \_\_\_\_\_ George Richardson \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Switzerland Co. Ind. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Jan. 29, 1879 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Mar. 3, 1958 \_\_\_\_\_

Age \_\_\_\_\_ 79 \_\_\_\_\_

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

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

Late Residence \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Disease \_\_\_\_\_ Coronary Thrombosis \_\_\_\_\_

Place of Death \_\_\_\_\_ Christ Hospital Cin. O. \_\_\_\_\_

Parents' Name \_\_\_\_\_ Samuel & Lucinda Wilson Richardson \_\_\_\_\_

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

In whose Lot to be Interred \_\_\_\_\_ Single grave \_\_\_\_\_ Sec. B.B. No. Grave 90

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

Name of Undertaker \_\_\_\_\_ Humphrey \_\_\_\_\_ Steele vault \_\_\_\_\_

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