

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. 3736

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

Name of Deceased \_\_\_\_\_ Mary Elizabeth Rochat \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Rising Sun, Ind. R. 2 \_\_\_\_\_

Date of Birth \_\_\_\_\_ Mar. 13, 1888 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Oct. 6, 1967 \_\_\_\_\_

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

Occupation \_\_\_\_\_ Housekeeper \_\_\_\_\_

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

Late Residence \_\_\_\_\_ Rising Sun, Ind. R. 2 \_\_\_\_\_

Disease \_\_\_\_\_ Carcinoma of Uterus \_\_\_\_\_

Place of Death \_\_\_\_\_ Dearborn Co. Hospital \_\_\_\_\_

Parents' Name \_\_\_\_\_ William Lostutter \_\_\_\_\_

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

In whose Lot to be Interred \_\_\_\_\_ Lot 44 \_\_\_\_\_ Sec. B \_\_\_\_\_ No. Grave 4 \_\_\_\_\_

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

Name of Undertaker \_\_\_\_\_ Detmer \_\_\_\_\_ Topseal vault \_\_\_\_\_

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