

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. 3820

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Walter Sanders _____

Place of Nativity _____ Switzerland Co. Ind. _____

Date of Birth _____ June 15, 1876 _____

Date of Decease _____ May 3, 1949 _____

Age _____ 72-10-18 _____

Occupation _____ Farmer _____

Single, Married or Widowed _____ 1st Katie B. Heady Sanders _____

Married to Delia Humphrey Sanders

Late Residence _____ Wavay, Ind. _____

Disease _____ Cerebral Hemorrhage _____

Place of Death _____ Residence _____

Parents' Name _____ George & Jane Dunning Sanders _____

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

In whose Lot to be Interred _____ Lot 103 E.H. Sec. B No. Grave I

Removed from _____

Name of Undertaker _____ Humphrey & P. _____

Permit applied for by _____