

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. 3827

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Robert Enoch Scalf _____

Place of Nativity _____ Madison, Ind. _____

Date of Birth _____ Feb. 25, 1876 _____

Date of Decease _____ Nov. 25, 1949 _____

Age _____ 73 yrs., 9 Months _____

Occupation _____ Retired carpenter _____

Single, Married or Widowed _____ Married _____

Late Residence _____ Rising Sun, Ind. _____

Disease _____ Natural causes internal Hemorrhage _____

Place of Death _____ Rising Sun, Ind. _____

Parents' Name _____ William Scalf _____

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

In whose Lot to be Interred _____ Single grave row 2 _____ Sec. Plat B _____ No. grave 49 _____

Removed from _____

Name of Undertaker _____ Detmer _____ Stone vault _____

Permit applied for by _____