## APPLICATION FOR BURIAL PERMIT

No. 4031 THE RISING SUN CEMETERY Name of Deceased \_\_\_\_Catherine L. Siekman German**y** Place of Nativity Date of Birth \_\_\_\_\_\_ 2-27-I944\_\_\_\_\_\_ Date of Decease \_\_\_\_\_II-2I-I904 Age \_\_\_\_\_60\_\_\_\_ Occupation \_\_\_\_\_ Single, Married or Widowed \_\_\_\_\_\_ Late Residence Disease \_\_\_\_\_\_ Place of Death \_\_\_\_\_\_ Parents' Name Size of Coffin or Box, Length \_\_\_\_\_Feet\_\_\_\_In. Width\_\_\_\_\_Feet\_\_\_\_In. In whose Lot to be Interred \_\_\_\_\_ Lat 46 \_\_\_\_ Sec.G \_\_\_\_ No. grave 2\_ Removed from \_\_\_\_\_\_ Name of Undertaker Permit applied for by \_\_\_\_\_\_