

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. 4047

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Lizzie Siekman _____

Place of Nativity _____ Ohio Co., Ind. _____

Date of Birth _____ Sept. 18, 1867 _____

Date of Decease _____ April 25, 1932 _____

Age _____ 64-7-7 _____

Occupation _____ Housewife _____

Single, Married or Widowed _____ Married _____

Late Residence _____ Rising Sun, Ind. _____

Disease _____ _____

Place of Death _____ Deaconess Hospital Cin. Ohio _____

Parents' Name _____ John & Louise Stegemiller _____

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

In whose Lot to be Interred _____ Lot 54 _____ Sec. B _____ No. Grave 2 _____

Removed from _____ _____

Name of Undertaker _____ Steele Stone vault _____

Permit applied for by _____ _____