

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. 4161

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Ora M. Sparks _____

Place of Nativity _____ Greensburg, Ind. _____

Date of Birth _____ April *, 6, 1874 _____

Date of Decease _____ July 17, 1963 _____

Age _____ 89 yrs. _____

Occupation _____ Housekeeper _____

Single, Married or Widowed _____ Widowed _____

Late Residence _____ Greensburg, Ind. _____

Disease _____

Place of Death ~~Residence~~ _____

Parents' Name _____ Henry W. & Clara Hall Dugle _____

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

In whose Lot to be Interred _____ Lot 89 _____ Sec. A _____ No. Grave 6 _____

Removed from _____

Name of Undertaker _____ Porter & Sons _____ Airseal _____

Permit applied for by _____