

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. 4277

Name of Deceased Dr. Frank H. Stevenson Rising Sun, Ind., _____, 19____

Place of Nativity Rising Sun, Ind.

Date of Birth Jan. 13, 1879

Date of Decease April 16, 1955

Age 79

Occupation M.D.

Single, Married or Widowed Married

Late Residence Chicago, Ill.

Disease Carcinoma

Place of Death Chicago, Ill

Parents' Name Dr. G.A. Stevenson

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

In whose Lot to be Interred Lot 149 Sec. A No. Grave 4

Removed from _____

Name of Undertaker Detmer Stone box

Permit applied for by _____