APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

No. 4291 Rising Sun, Ind.,_______ 19___ Name of Deceased ----Stephen Stewirt Place of Nativity Date of Birth _____ Date of Decease ______Reinternment Mar. 3 1924 Age _____ 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 _____ No._2___ No._2 Removed from _____ Name of Undertaker Permit applied for by ______