APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY No. 4366
Name of Deceased Transie 1. Sumfal
Place of Nativity Scott Col Kentucky
Date of Birth 12 - 20 - (20) 1899
Date of Decease
Age
Occupation Registered hurse
Single, Married or Widowed Dingle
Late Residence West Park Returnent ancimati Chio
Disease
Place of Death Christ Hospital Cincinnati Odio.
Place of Death Chut Hospital Cincinnati, Odio. Parents' Name Frank myra Crosthwait Swinford
Size of Coffin or Box, LengthFeetIn. WidthFeetIn.
In whose Lot to be Interred Franke + Red Swenford C-Lot 15 No. grave 6.
Removed from
Name of Undertaker markland Menny Dre. Air Seal.
Permit applied for by J. W. Caughlin Holf Brother