

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. 4720

Rising Sun, Ind.,

9-15

, 1975

Name of Deceased

*Roda Joy Weaver*

Place of Nativity

Date of Birth

Date of Decease

*9-3-1975*

Age

*88*

Occupation

Single, Married or Widowed

Late Residence

Disease

*Provisional*

Place of Death

*Madison, Ohio*

Parents' Name

Size of Coffin or Box, Length

Feet

In.

Width

Feet

In.

In whose Lot to be Interred

*Carl C. Weaver*

Sec.

*DR-Lot 7*

No.

*grave 3*

Removed from

Name of Undertaker

*Daniel C. Jones*

*Asst. Supt.*

Permit applied for by