APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

No. 4785

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	Rising Sur	n, Ind.,			_, 19
Name of DeceasedA	nna Belle Wells				
Place of Nativity					
Date of Birth					
Date of Decease	3-8-1923	Reint	ternment		
Age					
Occupation					
Single, Married or Widowed	4				
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	Single grave		Sec.Plat A	Nogra	ve_65_
Removed from					
Name of Undertaker					
Permit applied for by					