APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY No. 4885 Rising Sun, Ind.,_____, 19___ Name of Deceased _____Mattie Williams_____ Place of Nativity Date of Birth _____2-28-I898 I-30-I965 Date of Decease _____ Age _____66 Occupation _____ Single, Married or Widowed _____Married Late Residence _____Humphrey Road Cin_Ohio_____ Heart Disease -----Place of Death ____ Residence Parents' Name ___Robert & Ella Hastings Size of Coffin or Box, Length _____Feet____In. Width____Feet____In. In whose Lot to be Interred _____ Lot 35N.H ____ Sec. B ____ NGrave 2 Removed from _____ Strawser Name of Undertaker Permit applied for by _____