Form V. S. 4

INDIANA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS

BURIAL-TRANSIT PERMIT

Full name of deceased Charles Edward Mortinge Age 70
Place of death Noscrusko Sudiaria Date of death adril 34 19 44
Cause of death Carcinoma & Badder
Method of disposal Rurial Olestine Kosciiofo Jul. (Whether burial cremation, transit, storage, etc.) (Cemetery or crematory) (City or county) (State)
Funeral director Belles Tuneral Home Address Marsan Indiana
PERMIT
A certificate of death having been filed as required by the laws of Indiana, permission is hereby given to dispose of the body as above stated. Date: 1944 Signature 6 6 Health Officer) Address: Nausaw. Fulliam
CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW
Body was on 19 in
(Cametery or crematory)
Place Signature (Sexton or person in charge)
This Permit should be endorsed by the Sexton (or Funeral Director where there is no Sexton) and carefully preserved.