

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION



INDIANA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS

BURIAL-TRANSIT PERMIT

No. ....

Full name of deceased Edith M. Hartung Age 64  
 Place of death Ellettsville Ind Date of death 1/24/42  
(City or County) (State)  
 Cause of death Carcinoma of ovary  
 Method of disposal Interment Palmetto Palmetto Ind  
(Whether burial, cremation, transit, storage, etc.) (Cemetery or crematory) (City or county) (State)  
 Funeral director Donn Lamb & Sons Address 27 Wayne, Ind

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 1/27/42 Signature [Signature]  
(Health Officer)  
 Address .....

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was ..... on ..... 19 ..... in .....  
(Cremated, buried, stored, etc.) (Cemetery or crematory)  
 Place ..... Signature .....  
(Sexton or person in charge)