## INDIANA STATE BOARD OF HEALTH.

No. 82 PERMIT FOR BURIAL.
1-
County Mor. Township Warkeson Town
1 Part & Part 4- 4 1038
Date of Death 7 1938
Decedent's full name tour Utille Age 60
MA LALLE A MI
Disease causing death 19 William & Jung
Medical attendant J. K. Vann
1038
Proposed date of burial 19.00
Proposed place of burjal for Celebra Cernetry
Undertaker All Johns Address Messon
A Certificate of Death having been filed in my office in accordance with law, I hereby authorize the burial of the body of
A Certificate of Death having been filed in my office in accordance with law, I hereby authorize the burial of the body of said deceased person as stated above. In the case of death from a dangerous communicable disease, the burial must be conducted according to the rules of the State Board of Health.
AND TO THE STATE OF THE STATE O
Name of Health Officer or Deputy.
Dated 4 6 1938 Address. (Holder should Preserve this Permit.)
Datea
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