

INDIANA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

No.

PERMIT FOR BURIAL

County Allen Township Floyd City or Town

Date of Death June 1st 1938

Decedent's full name Joseph Rupp Age

Cause of death Cardio Vascular renal Disease

Medical attendant Robert Broyles

Place of death 20 1/2 W 4th st.

Proposed date of burial June 3rd 1938

Proposed place of burial Palastine

Undertaker Rebler funeral Home Address Warsaw

A Certificate of Death having been filed in my office in accordance with law, I hereby authorize the removal and 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.

Paul E. Leberly
Name of Health Officer or Deputy

Dated June 1 1938

Address

(Holder should preserve this Permit)