

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION



INDIANA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

BURIAL-TRANSIT PERMIT

No. 753

Full name of deceased Harold Halley Stickler Age 24
 Place of death Near Salistate France Date of death April 2, 1945
(City or County) (State)
 Cause of death Killed in action Permit # NY 014 R
 Method of disposal Burial Celestine Kosciusko, Ind.
(Whether burial, cremation, transit, storage, etc.) (Cemetery or crematory) (City or county) (State)
 Funeral director R. G. Reed Address Montona, 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 Sept. 10, 1948 Signature R. G. Reed
Deputy Health Officer
 Address Montona, Ind.

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)