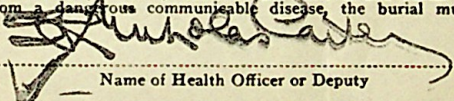


STATE OF INDIANA—DIVISION OF PUBLIC HEALTH
BUREAU OF VITAL STATISTICS**PERMIT FOR BURIAL**No. 611County St. Joseph Township Portage City or Town South BendDate of Death July 13 1936Decedent's full name Oliver J. Stevick Age 79Cause of death Chronic BronchitisMedical attendant Dr. B. G. [unclear]Place of death So. BendProposed date of burial July 15 1936Proposed place of burial St. Vincent Ind.Undertaker L. H. Cross Address So. Bend

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.


 Name of Health Officer or Deputy
Dated July 15 1936

Address

(Holder should preserve this Permit)