Form	v.	S.	4
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## INDIANA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS

## BURIAL-TRANSIT PERMIT

Basett	- Maala 750	
Full name of deceased	Age	
Place of death lalparacio	Tudesua Date of death Sept. 2/48	
(City or County)	(State)	
Cause of death leary cell	The first of the second	
Method of disposal Berral	Valestine Hoscinsko Jud.	
(Whether burial cremation, transit, storage, etc.)	(Cemetery or crematory) (City or county) (State)	
Funeral director Sabert G. Vrees	Address Meutone Ced,	
	PERMIT	
	by the laws of Indiana, permission is hereby given to dispose	
of the body as above stated.	(R) & G (Del)	
Date Sept. 23, 1948	Signature	
	(Health Officer)	
the second of the second second second second	Address Meutone Gud.	
CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW		
CEMENTAL ON CHEMINITORS INC	THOMES SHIELD OUT STREET BELOW	
Body wason	19 in	
(Cremated, buried, stored, etc.)	(Cometery or crematory)	
Place	Signature	
	(Sexton or person in charge)	
This Permit should be endorsed by the Sexton (or Funeral Director where there is no Sexton) and carefully preserved.		