INDIANA STATE BOARD OF HEALTH

No. 5 84 PERMIT FOR BURIAL
County Korousko Township Haurion City or Town Mentone
Date of Death afril 6 1933
Decedent's full name Lena B. Gandemark. Age 63
Cause of death Orterioscheasis
Medical attendant S. Lo. Musselly
Place of death at Home hear Ralestine
Proposed date of burial Robertine Can afil 28 1933
Proposed place of byrial Polestine Cerneta
Undertaker Lo P Selleries Address Mentone Inch
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.
L. P. Selfecies Defuty
Name of Health Officer or Deputy
Dated Ofish 25 1933 Mentone and
Address (Holder should preserve this Permit)