

INDIANA STATE BOARD OF HEALTH

PERMIT FOR BURIALNo. 156County Pose

Township _____

City or Town WarsawDate of Death December 4 1933Decedent's full name James H. Hawley Age 73Cause of death Lung CancerMedical attendant Dr. J. H. NewkirkPlace of death Harrison TownshipProposed date of burial December 6 1933Proposed place of burial Palmer CemeteryUndertaker W. H. Munroe Address Warsaw, Indiana

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.

W. H. Munroe
Name of Health Officer or Deputy

Dated December 5 1933

Warsaw, Indiana
Address

(Holder should preserve this Permit)