INDIANA STATE BOARD OF HEALTH

No. 70 PERMII FUR BURIAL
County Kessends Township Wayne City or Town Islandar
Date of Death Muly 4 193
Decedent's full name Jule M & Holmithen Age 2/
Cause of death Septacemio
Medical attendant J. S. Sexull M. D.
Place of death M. Danuel Haspital
Proposed date of burial July (2 195)
Proposed place of burial
Undertaker Phelps of Iwa Address Jul. Websler
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 con
ducted according to the rules of the State Board of Health. La, Fair M. D.
Name of Health Officer or Deputy
Dated July 5 1937 Montheller
Address (Holder should preserve this Permit)