

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION



INDIANA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

BURIAL-TRANSIT PERMIT

No. 697

Full name of deceased Paul Layson Summy Age 52
 Place of death Kosciusko Indiana Date of death Dec. 4, 1941
(City or County) (State)
 Cause of death Cerebral Apoplexy, Arteriosclerosis
 Method of disposal Burial Palatine Kosciusko Ind.
(Whether burial, cremation, transit, storage, etc.) (Cemetery or crematory) (City or County) (State)
 Funeral director Robert G. Reed Address Montone, Indiana

PERMIT

A certificate of death having been filed as required by the laws of Indiana, permission is hereby given to dispose of the body as above stated.

Date Dec. 7, 1941 Signature Robert G. Reed
DEPUTY Health Officer
 Address Montone, Indiana

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was _____ on _____ 19____ in _____
(Cremated, buried, stored, etc.) (Cemetery 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.