INDIANA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS

PERMIT FOR BURIAL
1) -1
County Toursho Township Wayne City or Town Warsaw
Date of Death Lec. 11 1939
Decedent's full name Marquest Touffer Age 74
Cause of death Topic agater - Mybearditis
Medical attendant D. R. Munghing
Place of death 3/5 %. Buffely St.
Proposed date of burial 1939
Proposed place of burial falestial
Undertaker Bibler Humus Compadress Maisan Ind.
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.
Name of Health Officer or Deputy
Dated 12/11 1939 Wasaw, elve.
Address (Holder should preserve this Permit)