

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION



INDIANA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS

BURIAL-TRANSIT PERMIT

No. 166

Full name of deceased Rebecca Cox Age 71  
 Place of death Elkhart Indiana Date of death 4-15-43  
 (City or County) (State)  
 Cause of death Surgical Shock - sepsis of. for mass carcinoma  
 Method of disposal Burial Palestine Warsaw Ind.  
 (Whether burial, cremation, transit, storage, etc.) (Cemetery or crematory) (City or county) (State)  
 Funeral director A. V. Johns Address Mentone 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 4-17-43 Signature J. J. Merkel M.D.  
 (Health Officer)  
 Address Elkhart 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)