

INDIANA STATE BOARD OF HEALTH

No. 1900

PERMIT FOR BURIAL

County MARION Township CENTER City or Town INDIANAPOLIS

Date of Death 4-10-1930

Decedent's full name Mrs. Mendenhall Age 74

Cause of death Myocardial Infarction

Medical attendant J. H. Cleveland

Place of death Rte. 100

Proposed date of burial 4-12-1930

Proposed place of burial Palestine

Undertaker Paul Jandis Address Warsaw

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 4-10-1930

Address

(Holder should preserve this Permit)