

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION

INDIANA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS



BURIAL-TRANSIT PERMIT

No. 55

Full name of deceased Lawrence J. Biethel Age 74
 Place of death His Home 9nd Date of death Apr 19
(City or County) (State)
 Cause of death Muscular Hanging
 Method of disposal Burial Palestine Muscular 9nd
(Whether burial cremation, transit, storage, etc.) (Cemetery or crematory) (City or county) (State)
 Funeral director Phas W Tucker Address Playpool 9nd
 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 Apr 21 Signature Phas W Tucker Dir
(Health Officer)
 Address Playpool 9nd

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)