Porm V. S. 4

## INDIANA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS

DIIDIA	A I TO	ANCIT	PERMIT

Jewasth ma	Pub. Dandot			
Full name of deceased faunette m (	age of authority Age 16			
Place of death Warsaw =	Andrews Date of death Oct. 16, 1947			
(City or County)	(State)			
Cause of death Olrebral sclerosi	- due to Cardiovascular renal.			
Method of disposal Quicial	Palestine Roscusko List.			
(Whether daylar creigation, ganste, storage, etc.)				
Funeral director Libler Tuneral Home	Address Warsaw Jan			
PERMIT				
I BRITT				
	by the laws of Indiana, permission is hereby given to dispose			
of the body as above stated.	000,10			
Date October 18, 1947	Signature 6. 6. Du Gais			
	(Health Officer)			
	Address Warsaw Lut.			
	TO THE COLUMN THE COLUMN COLUM			
CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW				
Body wason	19 in			
(Cremated, buried, stored, etc.)	(Cometery 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.				