

E-19

### BURIAL—TRANSIT PERMIT

#### MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased Other Frank Fisher No. \_\_\_\_\_

Cause of death Capillary ~~feeding tube~~ Thrombosis

Place of death Capland (County) Royal Oak (Township or village or city)

Date of death December 24 1973. Race White Sex Male Age 87

Method of disposal Burial (Whether burial, cremation, storage, etc.) Woodlawn (Cemetery or crematory)

County Caton State Michigan

A certificate of death or fetal death having been filed as required by the laws or regulations of this state, permission is hereby given to Geo. H. Vogt Address 7 Goodwill, Mack  
 (Funeral director or person acting as such)

to dispose of body of said deceased.

Signature Geo. H. Vogt Date 12-26 1973  
 (Check one:  Registrar,  Funeral Director,  Mortuary Science Licensee)

#### CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on Dec 28 1973 in Woodlawn  
 (State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Woodlawn Signature Lowell Helms  
 (Sexton or person in charge)

This permit must be endorsed by the sexton (or by the funeral director or Mortuary Science licensee where there is no sexton) and returned within seven days to the registrar of the district in which the burial takes place.

(OVER)

THIS PERMIT MUST ACCOMPANY REMAINS TO DESTINATION