

A-204

### BURIAL—TRANSIT PERMIT

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

Full name of deceased \_\_\_\_\_ No. \_\_\_\_\_  
 Cause of death Leila A King  
Respiratory Arrest  
 Place of death Hastings  
 (Township or village or city)  
 Date of death 13 19 23. Race White Sex Female Age 92  
 Method of disposal Burial  
 (Whether burial, cremation, storage, etc.)  
 County Calumet State Michigan  
 (Cemetery or crematory)

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 Frankville, Mich.  
 (Funeral director or person acting as such)  
 to dispose of body of said deceased.  
 Signature Geo. H. Vogt Date 11-14 19 23  
 (Check one:  Registrar,  Funeral Director,  Mortuary Science Licensee)

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

Body was Buried on Nov 16 19 23 in Woodlawn  
 (State whether cremated, buried, stored, etc.)  
 Place Frankville Signature Lowell Williams  
 (Cemetery or crematory)  
 (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