

F-6
E 1/2

BURIAL — TRANSIT PERMIT
MICHIGAN DEPARTMENT OF HEALTH

Milton Sprague No. 567

Full name of deceased.....
Cause of death..... **Cerebro vascular accident**
Place of death..... **Ingham Lansing**
(County) (Township or village or city)
Date of death..... **5/31/62** 19..... Race **W** Sex **M** Age **75**
Method of disposal..... **Burial Woodlawn**
(Whether burial, cremation, storage, etc.) (Cemetery or crematory)
County..... **Vermontville, Mich.** State.....

A certificate of death or stillbirth having been filed as required by the laws or regulations of this state, permission is hereby given to **George H. Vogt** Address..... **Nashville, Mich.**
(Funeral director or person acting as such)

to dispose of body of said deceased. Signature..... Date.....
Marie M. Basore (Check one: Registrar, Funeral Director, Mortuary Science Licensee) **6/1/62** 19.....

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was **Buried** on **6-2** in **Woodlawn Cemetery**
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)
Place **Vermontville** Signature..... **Stally Adrich** (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