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SE 4

**BURIAL — TRANSIT PERMIT**  
**MICHIGAN DEPARTMENT OF HEALTH**

Full name of deceased John H Konechny No. \_\_\_\_\_  
Cause of death Acute Congestive Heart Disease  
Place of death Hayes-Green-Beach Hospital  
(County) \_\_\_\_\_ (Township or village or city) \_\_\_\_\_  
Date of death December 1 1963 Race White Sex Male Age 76  
Method of disposal Burial Woodlawn Cemetery  
(Whether burial, cremation, storage, etc.) \_\_\_\_\_ (Cemetery or crematory) \_\_\_\_\_  
County Eaton State Michigan

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, Michigan  
(Funeral director or person acting as such)  
to dispose of body of said deceased. Date December 2, 1963  
Signature George H Vogt (Check one:  Registrar,  Funeral Director,  Mortuary Science Licensee)

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

Body was buried on Dec 3, 1963 in Woodlawn (Cemetery or crematory)  
(State whether cremated, buried, stored, etc.)  
Place Woodlawn Signature James J. Howell (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