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

Full name of deceased Byron C. Stallenbeck No. \_\_\_\_\_

Cause of death Acute Coronary Occlusion

Place of death Caton (County) Vermontville  
(Township or village or city)

Date of death August 16 1964 Race White Sex Male Age 90

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

County Caton State Mich

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

to dispose of body of said deceased.

Signature Geo. H. Vogt Date Aug. 19 1964  
(Check one:  Registrar,  Funeral Director,  Mortuary Science Licensee)

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

Body was buried on Aug. 20, 1964 in Woodlawn  
(State whether cremated, buried, stored, etc.) (Cemetery or crematory)

Place Vermontville Signature Lowell Hubbard  
(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