

F-66

BURIAL — TRANSIT PERMIT
MICHIGAN DEPARTMENT OF HEALTH

Full name of deceased Mrs. M. Walsh No. _____
Cause of death Metastatic Carcinoma
Place of death Barns (County) Macquille (Township or village or city)
Date of death September 22 1961 Race W Sex F Age 60
Method of disposal Burial (Whether burial, cremation, storage, etc.) Woodlawn (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 Vogt Funeral Home Address Macquille, Mich.
to dispose of body of said deceased. (Funeral director or person acting as such)

Signature Ada H. Skedgell Date Sept. 25 1961
(Check one: ☒ Registrar, ☐ Funeral Director, ☐ Mortuary Science Licensee)

CEMETERY OR CREMATORY AUTHORITY SHALL FILL OUT SPACE BELOW

Body was Buried on Sept. 25 1961 in Woodlawn Cem.
(State whether cremated, buried, stored, etc.)
Place Macquille Signature Wally C. Smith (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