

County DUVAL

STATE BOARD OF HEALTH OF FLORIDA

BUREAU OF VITAL STATISTICS

Precinct _____
(Write name, not number)

or
Inc. Town _____

City JACKSONVILLE, FLA.

Full name LULA JACKSON; Age 50; Sex FE; Color COL

Cause of death LOBAR PNEUMONIA

Date of death MAR 23 19 39 Removal to NEW MT. HERMAN CEMETERY

Via _____ Funeral Director's License No. 256

Funeral Director HOLMES F D Address JACKSONVILLE, FLA.

If the body is embalmed, the licensed embalmer is required to file an affidavit with the local registrar before burial, removal or transit permit is issued.

A D/C _____ having been filed in my office in accordance with the Laws of Florida,
(Death Certificate or Removal Permit)
I hereby authorize the removal and burial of the body of said deceased person as stated above.

Dated MAR 29 19 39 Local Registrar's Signature _____

Burial Permits must be delivered by the undertaker to the sexton or other person in charge of the burial ground or cemetery where burial takes place. When the body is to be shipped to a distant point, requiring the service of a common carrier, in addition to the Removal Permit, the body must be accompanied by a Transit Label as required by the State Board of Health. For full particulars see Rules and Regulations governing the transportation of dead bodies.

Sexton's Signature _____ Date of Interment _____, 19 _____

This permit must be endorsed by the sexton and returned to the Local Registrar of his district within ten days. If there is no sexton or person in charge of burial ground, the undertaker or person acting as such, shall sign the permit as sexton, giving date of interment. Write across face of permit the words "No person in charge," and return to Local Registrar of the district in which interment is made within ten days.

Only the Local Registrar (Deputy or Sub-registrar) may issue a Burial, Removal, or Transit Permit.

Permit No. 103837

Reg. Dist. No. 13-01