

TO ELM RIDGE MEMORIAL PARK, Inc.

(Office - 4500 Kilgore Ave., Muncie, Indiana.)

No. _____ Date MARCH 14, 1978

You are hereby authorized and instructed, subject to applicable law and your Rules and Regulations, to inter the remains of MABEL HAAS CRABILL in ^{grave} ~~crypt~~ # 5 of LOT 55 Section 8 - SUNRISE OVAL

Funeral Time 3:00 AM. THUR, MAR 16 Funeral Director MECKS

Vault Box AIR SEAL Size 30x78 Furn. by WIMMER

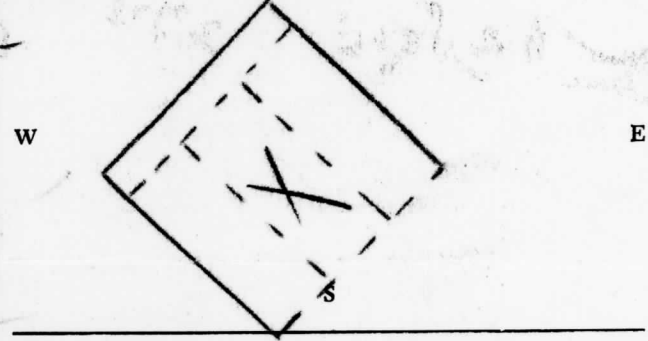
Music: Yes No Committal: Graveside Chapel

Space purchased herewith _____
Deed to be made to _____
Reservations (30 days) _____

Charges - Property	\$	_____
Services	\$	<u>215.00</u>
Vault/Box	\$	_____
_____	\$	_____
Sales Tax	\$	_____
Total	\$	<u>215.00</u>

Method of payment CASH MECKS
6% (annual rate) FINANCE CHARGE added after 30 days.

Grave location on lot -
Inscription



Permissible Memorials, Decorations and Embellishments are specifically designated in Rules and Regulations. NO MONUMENTAL WORK IS ALLOWED ON ANY LOT UNTIL ALL OTHER CHARGES HAVE BEEN PAID.

I/We hereby certify that I/We am/are the VAULTIER of the above-named decedent and this is your authority to make disposition of the remains of said decedent as above indicated. I/we accept and approve all above conditions and promise payment of charges set forth, plus any collection expense. I/We represent that I/we have the right to make this authorization and I/we agree to hold Elm Ridge Memorial Park, Inc., harmless from any liability on account of said authorization and interment. I/We also agree to conform to all Rules and Regulations heretofore or hereafter adopted to govern Elm Ridge and its use.

Name Walter C. Robbins Address R 12 24 1/2 town

Owner's endorsement (if necessary)

Name _____ Address _____