2811 $Female_{-}$ Name of Deceased $White_{-}$ Colored. Place of Nativity. Late Residence Date of Birth or Age. Date of Decease. Date of Deposit in Public Vault. Date of Interment_ Disease_ ansteati Parents Names In Whose Lot Interred WIDTH HEIGHT LENGTH Size of Coffin, Casket or Box. Name of Undertaker_ Opening & Closing \$ Removed from_ Single -Permit Obtained By. Vault. Lining -Place of Death. Single, Married, Widowed. What Relation to Lot Owner. Occupation_ To Supt. of Hopewell Cemetery. You are Hereby Authorized to Inter the Remains of. _In My Lot No._____Sec. No._

In Hopewell Cemetery.