

State of Nebraska  
Department of Health and Human Services  
VITAL RECORDS  
Permit for Transit or Cremation

This permit, when completely filled out and bearing the required signature, constitutes authority for transit or cremation of the deceased named below, in accordance with Section 71-605 R.R.S. of Nebraska.

APPLICATION FOR PERMIT

Name of Decedent MARJORIE ANN (LITTLE) JOYCE

Date of Death 11-17-13 Place of Death LINCOLN, NEBRASKA

Sex FEMALE Age 89 Date of Birth 1-29-24

Name and Address of Funeral Directing Establishment ROPER AND SONS, INC., 4300 'O' STREET, LINCOLN, NE 68510

Type of Disposition: Transit X Cremation \_\_\_\_\_

Place of Disposition SHENANDOAH, IOWA ROSEHILL CEMETERY  
(City and State) (Crematory)

AUTHORIZATION

I HAVE EXAMINED THE COMPLETED CERTIFICATE OF DEATH FOR THE DECEDENT NAMED ABOVE AND AUTHORIZE CREMATION OF THE REMAINS. (TO BE SIGNED BY THE COUNTY ATTORNEY OF THE COUNTY IN WHICH THE DEATH OCCURRED OR HIS/HER DESIGNATED REPRESENTATIVE PURSUANT TO SECTION 71-605 (Paragraph 4) R.R.S. of NEBRASKA.)

\_\_\_\_\_  
(Signature and Title) (Date)

DISPOSITION

Items below are to be completed by the funeral director in cases of transit and by the crematory official if remains are to be cremated. Method of Disposition:

Cremation \_\_\_\_\_  
(Signature of crematory representative) (Date)

Transit  11-20-13  
(Signature of funeral director) (Date)

Distribution of copies:

For cremation - original retained by crematory; copy to County Attorney  
For transit - original accompanies body; copy to be retained by Funeral Director