

(Address) 577 N. 4th St., Minneapolis, Minn.

122-73 VOL 1

STATEMENT BY LICENSED EMBALMER

I, C. P. Kidwell, Licensed Embalmer No. 3877
hereby certify that the body recorded on the reverse side of this certificate was embalmed by myself
L. E.
No. _____ or by _____, Registered Apprentice No. _____
working under my personal supervision.

Signed Clarence P. Kidwell
Licensed Embalmer No. 3877

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)