

STATEMENT TO CERTIFY THE EMBALMING OF
BODIES BY THE LICENSED EMBALMER
IN THE STATE OF ILLINOIS

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,

Joseph E. McCulloch, or by

Registered Apprentice No. _____, working under my personal supervision.

Signed

Joseph E. McCulloch

Licensed Embalmer No. 2460

P. O. Address

10 South 1st St

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.)

If this body is not embalmed, above space should be left blank.