

JAN 25 1943

RECEIVED SEP 10 1943

District Health Office No. 2,

District File Number 1142-1327

Date Filed 11-4-42

MAR 29 1943

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, or by.....

....., Registered Apprentice, No.....

working under my personal supervision.

Signed Walter G. Hopkins

Licensed Embalmer No. 2002

P. O. Address Kennett mo

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, fact should be so stated above.