

RECEIVED

District Health Officer No. 10

District File Number 3-44-509

Date Filed MAR 8 1944

STATEMENT BY LICENSED EMBALMER

I, Clyde McCallum, Licensed Embalmer No. 3226

hereby certify that the body recorded on the reverse side of this certificate was embalmed by Me

..... L. E.

No. or by Registered Apprentice No.

working under my personal supervision.

Signed Clyde McCallum
Licensed Embalmer No. 3226

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.)