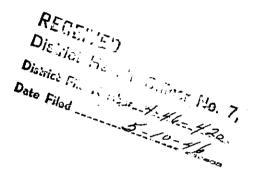
No. 2 4—2-43 5-17-39	DEPARTMENT OF COMMERCE STATE BOARD OF HIS STANDARD CERTIF	FICATE OF DEATH Side File N12938
T X35697	Registration District No. Primary Registration Dist	trict No. 2023 Registrar's No. 84
WRITE PLAINLY—USE UNFADING BLACK INK—MAKE A PERMANENT RECORD	Registration District No. 3 1. PLACE OF DEATH: (a) County	2. USUAL RESIDENCE OF DECEASED: (a) State Ward (b) County (f) Cou
	(b) Address Clentery 200	2 Not S. delle secand Bargier
-	(Date received local registrar) (Registrar's signature)	Address Christian of Tuo Date signed 4/14/46
1	/ Licensed Emhalmer's Sta	atement on Reverse Side)



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 R. R. Kenney

Licensed Embalmer No. 3099

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.