



---

---

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.....

James D Davis

Registered Apprentice No. 443

working under my personal supervision.

Signed.

*Henry A. Berkeley*

Licensed Embalmer No. 3835

P. O. Address

*Shelburne 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.**