FIED JUN 29 1951 STANDARD CERTIFICATE OF DEATH SIZE FILE No	. No. 300	1			E DIVISION OF I	•				20	じるる
PRINTED TO STATE Section Section	. 10.48	FILED JUN	2.9 1951	STA	NDARD CERT	IFICATE OF	DEATH	Stat	e File No		
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M SOUTH D. CITY Cit section compared limits, write RURAL and give township of the command of th	77		ATH:				RESIDENCE		lived. If in	stitution: r	eskience before
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13. FATHER'S MANE	層			Αæ			v County.	Mo.		II.S.	RY7 A
15. WAS DECEASED EVER IN U.S. ARMED FORCEST 16. SOCIAL SECURITY NO. Wrs. Annie Vobsells, Perryville, Mo. Mrs. Annie Vobsells, Perryville, Mrs. Annie									ID OR WIL		
S. WAS DECEASED EVER IN U.S. ARMED FORCES? Social Security None No.	_ ₹	John Vess	sells	1	Elizabeth M	eredith	l An	nie Blec	hle Ve	ssell	s
18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c)	¥ 1						ANT'S SIG	NATURE OR I	MANE		DDRESS
18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c)	\$	No No	ot service)	None	o. Mrs. Ann	4					
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(Licensed Embalmer's Statement on Reverse Side)	J		000	1	(Licensed Embalmer)	Statement on Reve	ree Side)	1		لاعميت	72.50

RECEIVED

JUN 27 1951

DISTRICT HEALTH OFFICE No. 6

File No.....

STATEMENT	BY	LICENSED	EMBALMER

I hereby certify that	the body whose name is rec	orded on the reverse s	ide of this certific	ate was embalme	d by me, or	by
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working under my personal supervision.

Student Embalmer No......

Student Embalmer

Student Embalmer

Licensed Embalmer No. 3 8 4 6 :

P. O. Address Terrynlle, Ins

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.