



SEP 22 1951

OCT 4 1951

1951

OCT 15 1951

SEP 18 1951

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.....

working under my personal supervision.

Student Embalmer No. ....

Signed..... *Lee Johnson* .....

Signed.....  
Student Embalmer.....

Licensed Embalmer No. *3392*

P. O. Address *Newburg 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.