

(Licensed Embellisher's Statement on Reverse Side)

NOV 20 RE

RECEIVED

Miss. Co. Health Dept

County File No. _____

Date Filed NOV 21 1952

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 _____

Student Embalmer No. 467

working under my personal supervision.

Student T. Davis W. Shelby Jr
Student Embalmer

Signed T. Davis W. Shelby Jr

Licensed Embalmer No. 2226

P. O. Address East Prairie, 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.