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22. I hereby certify that I attended the deceased from Jan 6, 19 53, to Dec. 29, 1953, that I last saw the dec	alive on Ub-	<u>c . 27, 195</u>			ne causes and on th	e date stated	
alive on DEC . 29, 1913, and that death occurred at b 200.m., from the causes and on the date stated above.	A		(Degree or title)	ADDRESS ·	, , , , .	, ·	AC. DATE SIG
22. I hereby certify that I attended the deceased from Jan 6, 1953, to DEC. 21, 1953, that I last saw the decade on OBC. 31, 1953, and that death occurred at b 2 C.m., from the causes and on the date stated above. [Degree or title] 23b. ADDRESS 23c. DATE SI	SIGNATURE	-	A A	1 soms /		mo.	12/30
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alive on DEC 27, 1953, and that death occurred at 2 C.m., from the causes and on the date stated above. Al., SIGNATURE (Degree or title) 23b, ADDRESS 24c. DATE SI 24c. NAME OF CEMETERY OR CREMATORY VI)24d. LOCATION (Dity, town, or county) (St. DITION, REMOVAL (Opposity) Dec. 31, 1953 Lebanon, Missouri	24a. BURIAL. CREMA TION. REMOVAL Opening Burial	<u> Dec. 2</u>	1, 1953 Leba	non Leban	on, Missou	ri.	
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MAY 21 1954

STATEMENT BY LICENSED EMBALMER

I hereby certify that	the body whose name is	recorded on the r	everse side of this ce	rtificate was embalmed
by me, or by			Student Emb	almer No
working under my personal	supervision			

Student......Signature of Student Embalmer

Signed Doolin Gorman

Licensed Embalmer No.

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRAPING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

rf this body is not embalmed, fact should be so stated above.