



FEB 11 1957

(printed) . . . . .

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was em-  
by me, or by . . . . ., Student Embalmer No. . . . .  
working under my personal supervision. . . . .

Student . . . . .  
Signature of Student Embalmer

Signed *Billie C. Gonder* . . . . .

Licensed Embalmer No. *49*

P. O. Address *St. Joseph* . . . . .

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (If  
to comply with the above constitutes grounds for revocation of license).  
If embalmed by a STUDENT, he also shall sign in his OWN handwriting.  
If this body is not embalmed, fact should be so stated above.