



~~Paul Warner~~  
~~618 St. Louis~~  
~~Pa 18400~~  
~~Joe 3-1858~~  
~~Dr R. J. O'Connell~~  
~~6693 S. Grand~~  
~~Patrol~~

270  
Cooper - R  
Warner  
Paul Brown  
Ch 14747  
tull 4 pm

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. .... working under my personal supervision..

Student .....

Signature of Student Embalmer

Signed M W Ruster

Licensed Embalmer No. 486

P. O. Address St Louis

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (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.