

ST. LOUIS -
707-1680
1 - Collins Ave.
ST. LOUIS 701-3116
Mrs. J. M. Morgan
457 97th W. Highway
1-30-59
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1-30-59

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 *Walter H. Hays*
Licensed Embalmer No. 48161

P. O. Address St. Louis 19/116

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 embalmed by a STUDENT, he also shall sign in his OWN handwriting.
If this body is not embalmed, fact should be so stated above.