

BIRTH NO. 13266 REG. DIST. NO. 42 PRIMARY REG. DIST. NO. 1000 Registrar's No. 285

DATE REC'D BY LOCAL March 6, 1953	REGISTRAR'S SIGNATURE Carl C. [Signature]	25. FUNERAL DIRECTOR'S SIGNATURE R. H. Taggart	ADDRESS King City Mo.
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(Licensed Embalmer's Statement on Reverse Side)

WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

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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 .....  
Student Embalmer

Signed

*R. G. Taggart*

Licensed Embalmer No. 2563

P. O. Address King City 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.