

AUG 22 1952

EMBALMER - MISSOURI

AUG 4 1952

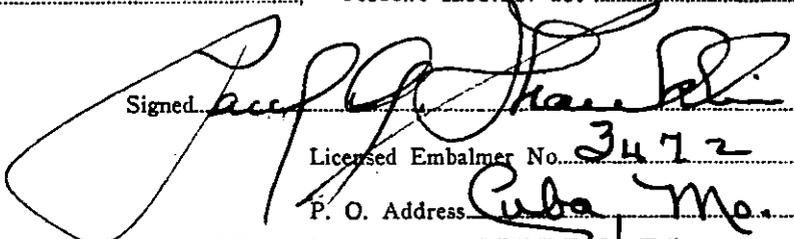
STATEMENT BY LICENSED EMBALMER

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  _____

Licensed Embalmer No. 3472

P. O. Address Cuba, 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.

THE STATE BOARD OF HEALTH OF MISSOURI
BUREAU OF VITAL STATISTICS

State File No. 24030

State of }
County of } ss.

AFFIDAVIT FOR CORRECTION OF A RECORD Local Registrar's No.

On this day of, 194....., before me appears

....., who, upon oath, states that the original record of ^{birth} death
for Bernard J. Suttmueller died July 24 1952 the State of
Missouri, and which was filed at Jeff City Mo on July 30 1952 should be corrected as follows:

Item No. should read

Instead of

Item No. 8 should read 1874

Instead of 1887

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read I made the error when

Instead of I made the entry in item 8

Item No. should read

Instead of

The above is true to the best of my knowledge, information and belief.

(SEAL)

Affiant: Paul H. Smith, Director
Relationship.

Paul H. Smith
Present Address.

Subscribed and sworn to before me this 19 day of Aug, 19452

My Commission expires Sept. 18, 1955 Notary Public.

Affidavits containing erasures will not be accepted; draw one line through error and write above it.

S-24030

1952