

MAY 28 1959

1959

MAY 18 1959

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was ex

~~by me, or by~~ Student Embalmer No.

~~working under my personal supervision.~~

Student
Signature of Student Embalmer

Signed *Robert H. Phillips*

Licensed Embalmer No. *18*

P. O. Address *State*

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.