

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth, stated.

PLACE OF BIRTH		MICHIGAN DEPARTMENT OF HEALTH	
County of <u>Eaton</u>		Division of Vital Statistics.	
Township of		RECORD OF BIRTH	
or Village of <u>Vermontville</u>		Registered No. <u>5</u>	
or City of		St., Ward)	
FULL NAME OF CHILD <u>Harold Junior McNaughton</u>		(If birth occurs in a hospital or other institution, give name of same instead of street and number.)	
Sex of child <u>male</u>		Date of Birth <u>April 28, 1931</u>	
Twin, triplet, or other? <u>1</u> and Number in order of birth <u>1</u>		Legitimate? <u>yes</u>	
Full Name <u>Harold Junior McNaughton</u>		Full Maiden Name <u>Georgia Beache</u>	
Residence (P. O. Address) <u>Vermontville</u>		Residence (P. O. Address) <u>Vermontville</u>	
Color or Race <u>white</u> Age at Last Birthday <u>26</u> (Years)		Color or Race <u>white</u> Age at Last Birthday <u>23</u> (Years)	
Birthplace <u>Mich</u>		Birthplace <u>Mich</u>	
Occupation (And Industry) <u>Laborer</u>		Occupation (And Industry) <u>Housewife</u>	
Number of child of this mother <u>3</u>		Number of children, of this mother, now living	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.*

I hereby certify that I attended the birth of this child, who was alive at 8 P.M. on the date above stated. (Born alive or stillborn)

Have eyes of child been treated with a prophylaxis solution? yes

Given or christian name added from a supplemental report.....19.....

(Signature) H. L. McNaughton
 Dated 5-12 1931
 Address Vermontville
 Filed 5-12 1931
Clara
 Registrar.