

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				STATE OF MICHIGAN	
County of <u>Eaton</u>				Department of Health—Division of Vital Statistics	
Township of _____				RECORD OF BIRTH	
or				Register No. <u>12</u>	
Village of <u>Vermontville</u>				St., _____ Ward, _____	
or				(If birth occurs in a hospital or other institution, give name of same instead of street and number.)	
City of _____					
FULL NAME OF CHILD <u>Billy Bert Hill</u>				{ If child is not yet named, make supplemental report, as directed.	
Sex of child	Twin, triplet, or other?	Number in order of birth	Legitimate?	Date of Birth	
<u>Male</u>	<u>Yes</u>	<u>1</u>	<u>Yes</u>	<u>Sept.</u>	<u>12</u> , 19 <u>28</u>
				(Month)	(Day) (Year)
FATHER			MOTHER		
Full Name <u>William J. Hill</u>			Full Maiden Name <u>Ella LaBurlKimmel</u>		
Residence (P. O. Address) <u>Vermontville, Mich.</u>			Residence (P. O. Address) <u>Vermontville, Mich.</u>		
Color or Race	Age at Last Birthday		Color or Race	Age at Last Birthday	
<u>White</u>	<u>28</u>	(Years)	<u>White</u>	<u>27</u>	(Years)
Birthplace <u>Melleken Mich.</u>			Birthplace <u>Charlote, Mich.</u>		
Occupation (And Industry) <u>P.M. Worker</u>			Occupation (And Industry) <u>Housewife</u>		
Number of child of this mother <u>2</u>			Number of children, of this mother, now living <u>2</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
I hereby certify that I attended the birth of this child, who was <u>Born alive</u> at <u>12</u> ³⁰ M., on the date above stated. (Born alive or stillborn)					
Have eyes of child been treated with one per cent solution of silver nitrate as required by law? <u>yes</u>			(Signature) <u>L. Donald Kelsey D.O.</u>		
			Dated <u>9/23</u> , 19 <u>28</u> <u>Attending Physician</u>		
			(Attending Physician, midwife, father, etc.)		
Given or christian name added from a supplemental report _____, 192 <u>8</u>			Address <u>Vermontville Mich.</u>		
			Filed <u>Sept. 24</u> , 19 <u>28</u> <u>A. L. Barningham</u>		
			Registrar.		
Was there any serious malformation or defect? _____					