

Reported
to Clerk

CERTIFICATE OF BIRTH
MICHIGAN DEPARTMENT OF HEALTH
Bureau of Records and Statistics

State File No.

FULL NAME
OF CHILD

Donald Vanu Rogers

Local File No. 8

Sex M Twin or Triplet 1 If so, born 1st, 2d, 3d 1 No. mos. of pregnancy 9 Is mother married? yes Date of Birth 2-24, 19 43

PLACE OF BIRTH:

County Eaton

Township

Village or City Vermontville, Mich.

Name of hospital or institution Russell Maternity
(If not in hospital, give street address)

USUAL RESIDENCE OF MOTHER:

State Mich. County Eaton

Township Chester

Village or City Vermontville, Mich.

Mailing Address R.F. Charlotte

FATHER

Full Name Russell V. Rogers

Color W. Age at time of this birth 25

Birthplace Mich.

Occupation (and Industry) Farmer

MOTHER

Full Maiden Name Beatrice A. Barry

Color White Age at time of this birth 19

Birthplace Mich.

Occupation (and Industry) Housewife

No. of other children of this mother, now living 0 No. of other children, born alive, now dead 0 No. born dead 0

I hereby certify that I attended the birth of this child, who was alive on above date at 8:30 P. M.
(Born alive or stillborn)

AS REQUIRED BY LAW:
Have eyes of child been treated with one and one-half per cent solution of silver nitrate?
yes
Was mother's blood tested for syphilis?
yes Date Dec., 19 43
If not tested, state reason

Signature C. L. D. McLaughlin

Dated 3/2, 19 43 M.D.
(Attending physician, midwife, father, etc.)

Address Vermontville, Mich.

Filed 3/3, 19 43 A. L. Bannister
Registrar