

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

State File No.

FULL NAME
OF CHILD

Judith Dale Aldrich

Local File No.

12

Sex *F*

Twin or Triple

If so, born 1st, 2d, 3d

No. mos. of pregnancy *9*

Is mother married? *yes*

Date of Birth

April 19, 1943

PLACE OF BIRTH:

County

Eaton

Township

Village or City

Vermontville

Name of hospital or institution

Mrs. Russell's Hospital
(If not in hospital, give street address)

USUAL RESIDENCE OF MOTHER:

State

Mich.

County

Eaton

Township

Village or City

Vermontville

Mailing Address

" Mich.

FATHER

Full Name

Leland Adolphus Aldrich

Color

white

Age at time of this birth

25

Birthplace

Vermontville Mich.

Occupation (and Industry)

Shipworker

MOTHER

Full Maiden Name

LaVane Bernice Northrup

Color

white

Age at time of this birth

26

Birthplace

Vermontville

Occupation (and Industry)

Housewife

No. of other children of this mother, now living

1

No. of other children, born alive, now dead

none

No. born dead

none

E.M.T.

I hereby certify that I attended the birth of this child, who was *alive* on above date at *10²⁵* 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 *10-3, 1942*

If not tested, state reason

Signature

L. Donald Kelsey D.O.

Dated

5-7, 1943

(Attending physician, midwife, father, etc.)

Address

Vermontville Mich.

Filed

5-7, 1943

A. L. Bammonham
Registrar