

Reported to Co. clerk
1-3-44

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

State File No.

FULL NAME OF CHILD Maynard Carl McChelland Local File No. 23

Sex M Twin or Triplet # If so, born 1st, 2d, 3d # No. mos. of pregnancy 9 Is mother married? yes Date of Birth 10-8, 1943

PLACE OF BIRTH:

County Eaton State Mich County Eaton

Township

Village or City Uxmontville Township

Name of hospital or institution Russell Maternity Village or City Uxmontville Mich
(If not in hospital, give street address) Mailing Address " "

FATHER

Full Name Maynard McChelland Full Maiden Name Virginia B Kimmel

Color White Age at time of this birth 28 Color White Age at time of this birth 22

Birthplace Ohio Birthplace Mich

Occupation (and Industry) Soldier 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 1

I hereby certify that I attended the birth of this child, who was alive on above date at 9 9 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 5-21, 1943

If not tested, state reason

Signature C. L. D. McLaughlin

Dated 10-13, 1943 (Attending physician, midwife, father, etc.)

Address Uxmontville Mich

Filed 10/14, 1943 A. L. Barningham
Registrar

1946