

Reported to Co. Clerk
4-17-44

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

State File No.

FULL NAME
OF CHILD

Carol Ann Bursley

Local File No.

3

Sex F Twin or Triplet # If so, born 1st, 2d, 3d # No. mos. of pregnancy 9 Is mother married? yes Date of Birth 3/9, 19 44

PLACE OF BIRTH:

County Eaton

Township

Village or City Vermontville

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

USUAL RESIDENCE OF MOTHER:

State Mich. County Eaton

Township Chester

Village or City

Mailing Address Charlotte Mich. R.F. 10 #5

FATHER

Full Name Dale E. Bursley

Color W. Age at time of this birth 23

Birthplace Mich.

Occupation (and Industry) Farmer

MOTHER

Full Maiden Name Geraldine L. Niccum

Color W. Age at time of this birth 18

Birthplace Indiana

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 5 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 Sept, 19 43

If not tested, state reason

Signature C. L. M. Laughlin M.D.

Dated 3/10, 19 44

Address Vermontville Mich.
(Attending physician, midwife, father, etc.)

Filed 3/10, 19 44 A. L. Birmingham
Registrar

201