PLACE OF BIRTH	MICHIGAN ARTMENT OF HEALTH
	ARTHENT OF HEALTH vision of Vital Statistics
Jownship of CER	FIFICATE OF BIRT H
or Supster	Register No/0.4
or UNO.	(If birth occurs in a hospital or other institution, give name of same
Giy of	instead of street and number.)
or CHILD Wording fee	supplemental report, as directed
child triplet, and in	order birth Legiti- Date of Birth (Month) (Day) (Year
Rulle Goland Edword	Lewman alice Fertrude dong
Residence P.O. Address Lukstu Rt 1	Residence (P. O. Address)
Color Race Age at Last Birthday3.	Color or Race What Birthday (Years)
Eirthplace Conada	Birthplace Canada
Occupation (And Industry) Weekour aut	5 Lulo (And Industry) / Lul
Number of child of this mother	Number of children, of this mother, now living 2
CERTIFICATE OF	ATTENDING PHYSICIAN OR MIDWIFE.*
I hereby certify that I attended the birth of on the date above stated.	this child, who was Born alive or stillborn.
Have eyes of child been treated with one cent solution of silver nitrate as re-	(Signature)
and by law?	Dated Sypt // 1927/ Thysuran
then or christian name added from a	Address Addres
plemental report192	Filed 9/12 1923/ Arena Printself.
	Registrar
I hereby certify tha	t the above is a true and correct
reproduction of the	Certificate on file in the Michigan
Department of Public	Health, Lansing, Michigan.
	FFR 27 1975
	Review M. J 1975
1,000	ren 1913
L. thing	Maurice S. Reizen, M.D., Director
	Michigan Department of Public Health

Certificate of Birth Dorothy Jean Newman (September 8, 1931) Courtesy of Dorothy Hutchinson (Newman)