

DEPARTMENT OF

Health & Rehabilitative Services

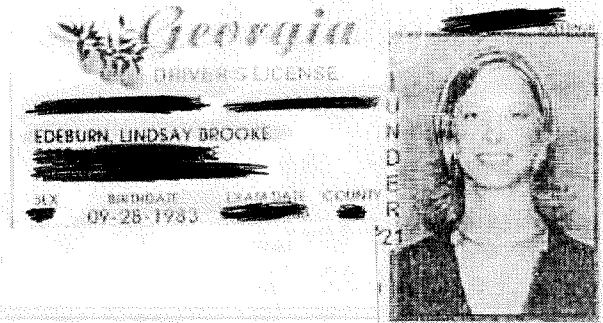
District Three
316 S.W. FOURTH AVENUE

Bob Graham, Governor

Alachua County Health Department
GAINESVILLE, FLORIDA 32601

Please Address

Reply to: P. O. Box 1327
Gainesville, Florida 32602
(904) 378-5321



CERTIFICATE OF LIVE BIRTH FLORIDA

FORM NO. 100-

THIS
IS
A
COPY
OF
THE
RECORD
ON
FILE
IN
THIS
DEPARTMENT.

I certify that the personal information provided on this certificate is correct to the best of my knowledge and belief.

Signature of Parent

THE ABOVE IS A COPY OF THE RECORD ON FILE IN THIS DEPARTMENT.

OCT 10 1983
GAINESVILLE

MYRLENE BROWNELL, CLERK