

City of Cleveland

Dept. of Public Welfare



Division of Health

Bureau of Vital Statistics

This Certifies that the following Certificate of Birth is on file at this office.

No. of Certificate*** **

NameSophia Putka

Date of BirthMay 13, 1911

Place of Birth809 Minkon St.

Father's NameAndrew Putka

Mother's Maiden NameSophia Piskura

Residence809 Minkon St.

Signed*R. J. Ochanes, M.D.* REGISTRAR
A. L. Rockwood, M.D. COMMISSIONER OF HEALTH