

No. 585 Permit

PHYSICIAN'S CERTIFICATE

STATE BOARD OF MEDICAL REGISTRATION AND EXAMINATION OF THE STATE OF INDIANA.

This is to Certify, That, pursuant to the provisions of "An Act regulating the practice of Medicine, Surgery and Obstetrics; providing for the issuing of license to practice; providing for the appointment of a State Board of Medical Registration and Examination and defining their duties; defining certain misdemeanors and providing penalties, and repealing all laws in conflict therewith and certain acts therein specified," approved March 8, 1897, Ernest G. Bellinger M.D., of the County of Steuben in the State of Indiana, whose post office address is Pleasant Lake, Steuben R. D. 1 County, Indiana, has made application for a certificate authorizing a license to practice Medicine, Surgery and Obstetrics in said State, and upon evidence presented it appears that he is the legal possessor of a Diploma Detroit College of Medicine of Detroit, Michigan dated May 4, 1905 and permit from the Indiana Board Medical Registration and Examination dated June 23, 1905

issued to the person named therein, that he has paid the proper fee prescribed by the law, and in all other respects complied with said act, and upon the presentation of this Certificate to the Clerk of Steuben County, is entitled to a license to practice Medicine, Surgery and Obstetrics in the State of Indiana.

IN WITNESS WHEREOF, the said Board of Medical Registration and Examination
Has caused this Certificate to be granted and signed by its President
And Secretary, and attested by its official seal at Indianapolis, this
23rd day of June 189 19 05

William L. Gott M. D. Secretary

PHYSICIAN'S LICENSE

State of Indiana, Steuben County, ss:

I, Ezra L. Dodge, Clerk of the Circuit Court of Steuben County, in the State of Indiana, do hereby certify that Ernest G. Bellinger has complied with the laws of the State of Indiana relating to the practice of Medicine, Surgery and Obstetrics, in the County and State aforesaid. – See page 257, Acts 1897. As per permit issued by said state board.

WITNESS my hand and the seal of said Court, this 30th day of June 189 19 05
Ezra L. Dodge Clerk

..STATEMENT..

Of Ernest G. Bellinger to whom license permit has been issued as per copy above for the practice of Medicine, Surgery and Obstetrics:

My name is Ernest G. Bellinger My age is 30 years
Place and birth Williamstone, Michigan My present address is Pleasant Lake
R F D 1 Indiana. Schools or system of medicine to which I belong Regular

State of Indiana, Steuben County, SS:

I, Ernest G. Bellinger solemnly swear the above and foregoing statement is true to the best of my knowledge and belief.

Ernest G. Bellinger
Subscribed and sworn to before me, this 30th day of June ~~189-19~~ 05

Ezra L. Dodge
Clerk Steuben Circuit Court