

No. 3157

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 licenses 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,

B. F. Crumeyer M. D. of the County of Fulton in the State of Indiana, whose postoffice address is Leeters Ford 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 License

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 Fulton 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 12th day

of July 1897
J. W. Webster M.D. President.
B. F. Crumeyer M.D. Secretary.

PHYSICIAN'S LICENCE.

State of Indiana, Fulton County, ss:
I, J. W. Webster, Clerk of the Circuit Court of Fulton County, in the State of Indiana, do hereby certify that Benjamin F. Crumeyer 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.

Witness my hand and the seal of said Court, this 30th day of July 1897
J. W. Webster Clerk.

STATEMENT

of Benjamin F. Crumeyer, to whom license has been issued as per copy above for the practice of Medicine, Surgery and Obstetrics:
My name is Benjamin F. Crumeyer My age is 41 years.
Place of birth Wesley, Ky County Ohio
Present address is Leeters Ford Indiana
School or system of medicine to which I belong Regular

State of Indiana, Fulton County, ss:
Benjamin F. Crumeyer, solemnly swear the above and foregoing statement is true to the best of my knowledge and belief.

Subscribed and sworn to before me, this 30th day of July 1897
J. W. Webster Clerk Fulton Circuit Court.