July 1	3/0	- SA	-	9
a long	3		Room	
	Name_B	aby Ba	y Shie	16/5
	Date of Birth.	11/25	55_Time	# 05 AM
	Birth Weight_	7 lbs. /	oz. Length	20/2 in.
1/1/				
	Doctor	aulkne	e .	
	400		E. 3) PET
*			(1)	3 MILE
39888	COMPLIMENTS OF PET	MILK COMPANY	200	20





This Certifies that FRANCIS JOHN SHIELDS ___was born in

The Saugus General Hospital, Saugus, Mass.

on the TWENTY FIFTH (25th)

In Witness Whereat the said Hospital has caused this certificate to be signed by its duly authorized officer and its Corporate Seal to be hereunto affixed.

Fuil & Gamero Fil adminis hater Superintendent

Attending Physician



The Commonwealth of Massachusetts TOWN OF SAUGUS

COPY OF RECORD OF BIRTH

I, the undersigned, hereby certify	that I am the Clerk o	f the Town of Saugus,	that as such I
have custody of the records of birth	required by law to be	kept in my office; the	at among such
records is one relating to the birth of			

records is one relating to the birth of		
Francis	John Shields	
and that the following is a true copy of so much	of said record as relates to said birth, namely:	
	ohn Shields	
	25, 1955	
Place of Birth Saugus, Ma	833.	
Sex Male Color White	e If Twin	
FATHER	MOTHER	
73	Name Leona Dorothy Martel	
Name Francis James Shields (Maiden Name)		
Residence Saugus, Mass.	Residence Saugus, Mass.	
	Birthplace Lynn, Mass.	
Birthplace Brooklyn, N. Y.	Birthplace	
Occupation <u>Engineer</u>		
Date of Record		
And I hereby certify that t	the foregoing is a true copy from said records.	
Witness my hand and sea	al of said Town of Saugus on this	
30.thday	of <u>March</u> , 19 60	
	Jeff Jakette	

Certificate of Baptism Certificate of Baptism #1 (Synod VII, 101, §1) all que mass. Name FRANCIS JOHN SHIELDS Date of Birth_ Date of Baptism Dec. 18, 195 Place of Baptism Bl. Sacrament Minister of Baptism Lum ? - Corl (Signed) Rev. Nom S.

Saugus General Hospital

81 CHESTNUT STREET -

EAST SAUGUS, MASS.

Sept. 27, 1955.

Mrs. Leona Shields, 13 Stocker Street, Saugus, Massachusetts.

Dear Mrs. Shields,

We are very happy to notify you that Doctor Faulkner has booked you at this hospital for maternity, due Nov. 27, 1955.

Our maternity rates are as follows:

Private Room	\$18.00	per	day
Semi Private Room	12.00	11	11
Delivery Room Charge	25.00		
Baby's Hospitalization	6.00	98	79

Drugs and Laboratory Work will be charged according to the amount ordered by the doctor.

We are enclosing our statement for an advance deposit of \$125.00 so that reservations will be made for your admission and everything will be in readiness for you on your due date.

If you are a Blue Cross member, entitled to maternity benefits, your advance payment will be \$55.00 as Blue Cross covers \$70.00. Also, please send in your Blue Cross Certificate Number with deposit.

If you are a Mutual Benefit Association dependent entitled to maternity benefits, your payment will be \$75.00 as the M. B. A. covers \$50.00 on maternity cases.

An itemized bill will be presented to you on the day of discharge and any balance due shall be paid at discharge.

Only personal items will be necessary for the mother to bring to the hospital for her confinement.

Very truly yours,

SAUGUS GENERAL HOSPITAL

GENERAL ELECTRIC INSURANCE PLAN COMPREHENSIVE MEDICAL EXPENSE WORK SHEET NO. 1

Employee's Name Francis J. Shields		Year 1956					
Patient's Name Prancis J. Shields							
13 Stocker St. Seugus, Mass.		COVERED MEDICAL EXPENSE (ASSIGNMENT OF ALLOWABLE CHARGES)			EXPENSES		
LINE		TOTAL	Hospita1	Doctor (Surgeon)	Insured (Employee)	Other	COVERED
1	Hospital Room and Board Sangus General	30.00	30.00				
2	Special Hospital Services 11/25-11/30 (5days)	10.00	10.00				
3	Surgical Operations Dr. E.B. Faulkner 11/30	25.00			25,00		
4	Anesthesia						
5	Diagnostic X-Rays						
T 6	Ambulance Service						
Y 7							
P							
E 8	Total Type A Expenses (Sum of Lines 1-7)	65.00	40.00		25.00		
9	Deductible (and other Group benefits)		25.00		-		
A 10	Line 8 less line 9		15.00				
11	Amount subject to 100% payment		15.00		25.00		
12	Line 10 less line 11						
13	85% of line 12	15.00					
14	Enter line 11						
15	15 Total Type A Expense benefits payable (line 13 plus line 14)		15.00		25.00		
16	Physicians' Charges						
17	Registered Nurses						
18	Laboratory Examinations (not Type A)						
T 19	X-Ray and Radium Treatments (not Type A)						· ·
Y 20	Blood Transfusions (not Type A)						
P 21	Oxygen (not Type A)						
E 22	Drugs and Medicines (not Type A)						
23							
В							
24	Total Type B Expenses (Sum of Lines 16-23)						
25	Deductible (and other Group benefits)						
26	Line 24 less line 25						
27	Total Type B Expense benefits payable (75% of line 26)						
28	Total Types A & B Expense benefits payable (line 15 plus	line 27)	4				
29	Memo for future claims:		For Insurar	ce Company	Use		
	Initial Expense incurred last quarter of this calendar year						
30	Total previously paid						
31	Insurance Company payment/2 - 23-55	40,00					
32	Total payments to date						
33	Pension Unit No. 34 Calculated By	MEM	* // 3				
	Date 12/14/55		100				

SAugus 8-2378

EDWIN B. FAULKNER, M. D. 42 CHESTNUT STREET SAUGUS, MASS.

	Dec. 1,	19 5
Mr. F. Shields		
13 Stocker Street		
Saugus, Mass.		

FOR PROFESSIONAL SERVICES:

Paid 12-12-55 # 20-20

Balance \$145.00

GENERAL @ ELECTRIC

C 0 M P A N Y
920 Western Ave., West Lynn 3, Mass.

C. S. TSORVAS

DEC 8'55

MASS PD. METER

DEC 8'55

MASS PD. METER

DEC 8'55

L'Eona's Confinement - for Joy