CERTIFICATE OF BIRTH

STATE OF NORTH CAROLINA

File No. 39193

Registration District No. 106 ... Registered No. 214
(For use of Local Registrar)

... Ward)

(No. ... St.; ... instead of street and number.)

... in a hospital or other institution, give name of same | If child is not yet named, make supplemental report as directed

(2) Full Name of Child Lucille Mable Ball

(3) Sex: Female | (4) Number in order of birth | (5) If Twin or Triplet, Number | (6) Date of Birth: Sept 18 1923 (Month) (Day) (Year)

FATHER

(7) Full Name: Ball

(8) Color or Race: White

(9) Age at Last Birthday: 24 (Years)

(10) Birthplace: Ashland, NC

(11) Occupation: Farmer

(12) Number of children of this mother now living, including present birth: 4

MOTHER

(13) Maiden Name: Essie Lunsford

(14) Present Residence or Post Office: Spencer NC

(15) Color or Race: White

(16) Age at Last Birthday: 27 (Years)

(17) Birthplace: Spencer NC

(18) Occupation: Domestic

(19) Number of children of this mother now living, including present birth: 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at ... M. (Hour A. M. or P. M.) on the date above stated.

(22) (Signature) W. R. Stevens

(23) State whether Physician or Midwife: M.D.

(24) Address of Physician or Midwife: ...

(25) Given from a supplemental report: ...

(26) Witness: ... (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Dec 10 1923 (28) W. F. Smith Local Registrar

Registrar ... 19...

When the attending physician or midwife, then the father, householder, etc., should make this return.

If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARRIED REGISTER FOR RETURN. ... IS A PERMANENT RECORD. ... WITH DIACRITICAL MARK PEN BLACK ... PLACE-BIRTH, No. 1 THE OFFICIAL ...

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