

STATE OF MISSISSIPPI

CERTIFICATE OF BIRTH

OFFICE OF HEALTH COMMISSIONER
BUREAU OF VITAL STATISTICS
State Board of Health

40922

Name of Nguyen Tan
Residence of Beaufort
Sex of

Registration District No. 740 Registered No. 166
(For use of Local Registrar)

City of (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
Date of birth (If child is not yet named, make name of child as stated)

Full Name of Child John White

Sex Male Age 1 Year 1 Month 1 Day 16
Is he named after a dead person? No

FATHER.		MOTHER.	
(1) NAME OF FATHER	<u>X</u>	(1) NAME OF MOTHER	<u>Judie White</u>
(2) ADDRESS OF FATHER	<u>X</u>	(2) ADDRESS OF MOTHER	<u>Hampton Rd</u>
(3) COLOR OF FATHER	<u>White</u>	(3) COLOR OF MOTHER	<u>White</u>
(4) AGE AT LAST BIRTHDAY	<u>16</u>	(4) AGE AT LAST BIRTHDAY	<u>16</u>
(5) OCCUPATION	<u>House work</u>	(5) OCCUPATION	<u>House work</u>
(6) Number of children born to mother, including present birth	<u>1</u>	(6) Number of children of this mother now living, including present birth	<u>1</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(1) I hereby certify that I attended the birth of this child, who was
on the date above stated.
(2) (Signature) Walter Rivers
(3) State whether Physician or Midwife Midwife
(4) Address of Physician or Midwife Hampton

Given name added from a supplemental report
(5) Witness (Signature of Witness necessary only when question 2 is signed by mark) Dr. Rogers
(6) Date Dec 24 1923
(7) Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make the report. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborn before the fifth month of pregnancy.