

N. 2.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

DESAI OF COLUMBIA, COLUMBIA, N. C.

(1) PLACE OF BIRTH

County of Adair

Township of Robert.....

of

Inc. Town of.....

City of _____

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Jonathan Upchurch If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <i>Boy</i>	(4) Twin or Triplet <i>Twin</i> To be answered only in event of Twins or Triplets	(5) Number in order of birth <i>1</i>	(6) Are Parents Married? <i>Yes</i>	(7) DATE OF BIRTH <i>Dec 14/22</i> (Name of Month) (Day) (Year)
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<p>FATHER.</p> <p>(8) FULL NAME <i>James Buchanan</i></p>		<p>MOTHER.</p> <p>(14) NAME BEFORE MARRIAGE <i>Elizabeth Lerner</i></p>	
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(8) PRESENT POSTOFFICE OF FATHER *Freeport, Me*

OF FATHER		OF MOTHER	
(10) COLOR OR RACE	Col	(16) COLOR OR RACE	Col
(11) AGE AT LAST BIRTHDAY	(Years)	(17) AGE AT LAST BIRTHDAY	(Years)

(12) BIRTHPLACE Jasper Co. La.	(18) BIRTHPLACE Jasper Co. La.
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(13) OCCUPATION
Farmer

(14) OCCUPATION
Housewife

(23) Number of children born to mother, including present birth { 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was white at 7 M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Onesa X Envoles

(24) Submit whether Physician or Midwife of _____ Address of Physician or Midwife
Midwife - Cleveland, OH

Given name added from a supplemental report

(Signature of Witness necessary only
when question 23 is signed by mark)

....., 19

(27) Filed 12/20 22 19

(28) HC Jameson

*When there was no 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.

It is a common mistake to think that if a child is born with a defect, it must not be reported as a stillborn. No report is desired of a stillborn before the fifth month of pregnancy.

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