

21807

2) Full Name of Child LeRon Ford

10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

FATHER.	
1. NAME	John Hart.
2. CURRENT ADDRESS OF FATHER	Marion St
3. RACE	colored
4. BIRTHPLACE	Marion St
5. OCCUPATION	Laborer
6. AGE AT LAST BIRTHDAY	35

100 NAME BEFORE Mottie Davis
101 SURNAME
102 FIRST NAME Marion S Co
103 COLOR OF HAIR colored (17) AGE AT LAST BIRTHDAY 26
104 BIRTHPLACE
105 OCCUPATION
106

2) Number of children born to mother, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(26) (Signature) <u>[Signature]</u>	(28) Address of Physician or Midwife
(24) State whether Physician or Midwife	

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 25 is signed by mark)

(27) Subd. Aug 13, 1923 (28) Lava Manly, Ca. Local Registrar

19 Registrar

..... householder, etc. should make this return.

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 before the fifth month of pregnancy.