

(1) PLACE OF BIRTH

County of Adair

Township of Adair

or
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

New Magdalena Cantu

Registered No. 18
(For use of Local Registrar)

(3) SEX OF CHILD Girl (4) TYPE OF BIRTH Normal (5) DATE OF BIRTH April 23
(Month) (Day) (Year)

(6) NAME OF FATHER Edgarfield S. C. Cantu (7) NAME OF MOTHER Lola Jones

(8) PRESENT RESIDENCE OF FATHER Adair S. C. Cantu (9) PRESENT RESIDENCE OF MOTHER Adair S. C. Cantu

(10) COLOR OF CHILD Col. (11) AGE AT LAST BIRTHDAY 47 (12) COLOR OF MOTHER Col. (13) AGE AT LAST BIRTHDAY 37

(14) BIRTHPLACE OF CHILD Edgarfield S. C. (15) BIRTHPLACE OF MOTHER Edgarfield S. C.

(16) OCCUPATION OF FATHER Farmer (17) OCCUPATION OF MOTHER House wife

(18) Number of children born to mother, including present birth 12 (19) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated.

(21) Signature of Physician or Midwife Edgarfield S. C. Cantu (22) Address of Physician or Midwife Adair S. C.

(23) Given name added from a supplemental report

(24) Signature of Witness Edgarfield S. C. Cantu (25) Address of Witness Adair S. C.

(26) Filed 4/27/23 (27) Local Registrar Edgarfield S. C. Cantu

*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.

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