

N. B.—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 8.

(1) PLACE OF BIRTH

County of Yamhill
 Township of Yamhill

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

46360

Registration District No. 7-209 Registered No. 9
 (For use of Local Registrar)

(2) Full Name of Child

Joseph Pearson

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy

(4) Twin or Triplet? No
 To be answered only in event of Twins or Triplets

(5) Number in order of birth —

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Aug 11 1914
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wes Pearson

(9) PRESENT POSTOFFICE OF FATHER Yamhill S

(10) COLOR OR RACE white

(11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Yamhill S

(13) OCCUPATION Plumber

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

MOTHER.

(14) NAME BEFORE MARRIAGE Mrs Ashworth

(15) PRESENT POSTOFFICE OF MOTHER Yamhill

(16) COLOR OR RACE white

(17) AGE AT LAST BIRTHDAY 22 (Years)

(18) BIRTHPLACE Transylvania Co Mo

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 6 PM, on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. J. W. Warden

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Yamhill S

Given name added from a supplemental report

(26) Witness

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

(27) Filed

1916

(28)

Local Registrar

*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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