

Form No 1.

## (1) PLACE OF BIRTH

## CERTIFICATE OF BIRTH

County of *Cheshire*Township of *Cheshire*Inc. Town of *Cheshire*City of *Cheshire*Registration District No. *1201*File No. *48577*(2) Full Name of Child *Garfield Gillerpie*(a) BOY OR GIRL? *boy*

(d) Twin or Triplet?

(c) Number in order of birth

(e) Are Parents Married? *Yes*

(f) Date of Birth

## FATHER

(b) FULL NAME

*Garfield Gillerpie*

(g) PRESENT POSTOFFICE OF FATHER

*Cheshire IL*

(i) COLOR OR RACE

*Colord*(ii) AGE AT LAST BIRTHDAY *34*

(j) BIRTHPLACE

*Marlboro IL*

(k) OCCUPATION

*Sawmill Work*

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

*8*

## MOTHER

(m) NAME BEFORE MARRIAGE

*Belen Blum*

(n) STREET POSTOFFICE OF MOTHER

*Cheshire IL*

(o) SUBURB OR RACE

*Colord*

(p) BIRTHPLACE

*Cheshire IL*

(q) OCCUPATION

*Farmer*

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

*8*

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(24) State whether Physician or Midwife

*Physician*

Given name added from a supplemental report

(25) Witness

*John J. Smith*

(Signature of Witness necessary only when question 24 is signed by midwife)

(27) Filed

*John J. Smith*

(28)

*John J. Smith*

When there was no attending physician or midwife, then the father, householder, etc. should make a report as to whether a child breathes even once, it must not be reported as stillborn. No report is desired of stillborn children.

MARGIN RESERVED FOR RECORDING. WHEN BLANK, WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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 2. City of Columbia