

REGISTERED BY NURSING
Nurses or Midwives
Nurses or Midwives
State Board of Health

3006

Registration Number No. 703

Registered No. 2
(For use of Local Registrar)

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 Joseph Hunter (If child is not yet named, make appropriate entry as above)

Sex Male Age 20 Date of Birth Feb 2, 1923

FATHER
Name J. H. Hunter
Address Co. 1st SC
Rank Colonel (If Army, Navy, Air Force, Marine, Coast Guard, etc., give branch and rank)
Occupation Cooper Miner SC
Description Labourer

MOTHER
(14) Name Joseph Hunter
(15) Address Co. 1st SC
(16) Rank Colonel (17) Branch SC
(18) Occupation Cooper Miner SC
(19) Description Labourer

(21) Number of children of this mother now living one

(22) I hereby certify that I attended the birth of this child, who was born alive yes (How A. M. or P. M.) 2 A. M.
on the date above stated.

(23) (Signature) John H. Hunter (24) State whether Physician or Midwife Physician
(25) (Signature) Dr. Hunter (26) (Signature of Nurse or Midwife) Dr. Hunter

(27) Witness (Signature of Witness) John H. Hunter
(28) Date Feb 16, 1923 (29) (Signature of Registrar) John H. Hunter

(30) (Signature of Registrar) John H. Hunter