

Form No. 1

(1) PLACE OF BIRTH

County of *Orange*Township of *Orange*

or

Inc. Town of

or

City of

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

CERTIFICATE OF BIRTH

STATE OF NORTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

12549

Registration District No.

Registered No. *33*

(For use of Local Registrar)

(No.

St.;

Ward)

(2) Full Name of Child *Charles*

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

(3) BOY OR GIRL *Boy*

(4) Twin or Triplet?

To be answered only in case of Twin or Triplet

(5) Number in order of birth *1*(6) Are Parents Married? *Yes*(7) DATE OF BIRTH *Jan 20 1923*

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME *Victor Schuman*(9) PRESENT POSTOFFICE OF FATHER *Orange*(10) COLOR OR RACE *White*(11) AGE AT LAST BIRTHDAY *31*

(Years)

(12) BIRTHPLACE *Ill.*(13) OCCUPATION *Farmer*(20) Number of children born to mother, including present birth *1*

MOTHER

(14) NAME BEFORE MARRIAGE *Marie Schuman*(15) PRESENT POSTOFFICE OF MOTHER *Orange*(16) COLOR OR RACE *White*(17) AGE AT LAST BIRTHDAY *24*

(Years)

(18) BIRTHPLACE *Ill.*(19) OCCUPATION *Farmer*(21) Number of children of this mother now living, including present birth *1*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) *Victor Schuman*

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed *Jan 20 1923*

(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

MARGIN RESERVED FOR BINDING.

WHITE PLAINLY, WITH FADING INK—THIS IS A PERMANENT RECORD.

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 3.

McGraw-Hill, Columbia, S. C.