

85881

State Board of Health

Registered No. 84
(For use of Local Registrar)

... St.; Ward)

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

(2) Full Name of Child

(7) DATE OF BIRTH 11, 13, 1962
(Name of Month) (Day) (Year)

FATHER.

MOTHER

(14) NAME BEFORE MARRIAGE

Wiles V E

(15) PRESENT
POSTOFFICE
OF MOTHER

(II) AGE AT LAST BIRTHDAY 43
(Years)

(16) COLOR
OR
RACE

(17) AGE AT LAST BIRTHDAY 21
(Years)

12) BIRTHPLACE

(18) BIRTHPLACE

(13) OCCUPATION

(19) OCCUPATION

10) Number of children born to mother, including present birth

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(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 23 is signed by mark)

(27) Filed

Dec. 11. 1916

(28)

signed by mark) Albert W. Hove
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.

4 a child breathes even once, it must not be reported as stillborn. At the fifth month of pregnancy