

(1) PLACE OF BIRTH

County of BladenTownship of Irishor
Inc. Town of
orCity of (No. 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 Arthur Thomas If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>Is answered only in case of twins or triplets</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE BIRTH <u>Feb. 22</u> 19 <u>16</u> <small>(Name of Month) (Day) (Year)</small>
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(8) FULL NAME OF FATHER <u>Thomas</u>	(14) NAME BEFORE MARRIAGE <u>Lily Carter</u>
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(9) PRESENT POSTOFFICE OF FATHER <u>Towards, D.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Towards, D.</u>
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(10) COLOR OR RACE <u>Col</u>	(11) AGE AT LAST BIRTHDAY <u>43</u> <small>(Years)</small>
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(12) BIRTHPLACE <u>Towards, D.</u>	(16) COLOR OR RACE <u>Col</u>	(17) AGE AT LAST BIRTHDAY <u>39</u> <small>(Years)</small>
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(13) OCCUPATION <u>Farmer</u>	(18) BIRTHPLACE <u>Towards, D.</u>
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(19) OCCUPATION <u>Housewife</u>	(20) Number of children born to mother, including present birth <u>12</u>
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(21) Number of children of this mother now living, including present birth <u>11</u>
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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. (Born alive or stillborn) (Hour A. M. or P. M.) 10:00 P. M.(23) (Signature) Maya L. L...(24) State whether Physician or Midwife (25) Address of Physician or Midwife Towards, D.

Given name added from a supplemental report

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

(27) Filed 377 1916 (28) E. L. Thompson 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.

File No. — For State Registrar Only

52191

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