

## File No.—For State Registrar Use

**State Board of Health**

Registered No. 421

(For use of Local Registrar)

(No. .... St. .... Ward ....)

other institution, give name of same instead of street and number.)

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

\_\_\_\_\_

DATE OF Jan. 15 1953

(Name of Month) (Day) (Year)

**MOTHER.**

2011

also V2 rank

1

West Hill, N.C.

1950年12月15日

(17) AGE AT LAST BIRTHDAY 22

(Year)

\_\_\_\_\_

100

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22



of this mother } .....  
 & present birth }

DATE: 11/11/1964

**DWIFE** ~~20~~ 4

Stillborn) (Hour A. M. or P. M.)

11/28/81

Address of Physician or Midwife

100-41212

700

.....  
 as necessary only

igned by mark)

1. Miller

Local Registrar

should make this return.

er, etc., should make this record desired of stillbirths before the

MEMORANDUM, ETC., SHOULD MAKE TWO

No report is desired of situation  
day.

... ..

... ..

... ..

[illegible]

Fig. 1. The effect of the concentration of the solution of the initiator on the rate of polymerization of  $\alpha$ -methylstyrene in the presence of  $\text{Cu}^{2+}$  ions. The concentration of the monomer was 0.05 mole/l. The concentration of the initiator was 0.001 mole/l. The temperature was 50°C. The concentration of the  $\text{Cu}^{2+}$  ions was 0.001 mole/l. The concentration of the  $\text{Cu}^{2+}$  ions was 0.001 mole/l.