

File No.—For State Registrar Only

30688

Registration District No.

Registered No. 51

(For use of Local Registrars)

(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 Nancy Harmethia Underhill If child has not yet been named, make supplemental report as directed

(7) DATE OF BIRTH: Sept 13 1924

FATHER

MOTHER

(14) NAME BEFORE MARRIAGE Anna Montgomery

(15) PRESENT POSTOFFICE OF MOTHER *Caraway, S.F.*

(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *20*
(Years)

(19) BIRTHPLACE
Harry Co.

(19) OCCUPATION
Housekeeper

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(2) I hereby certify that I attended the birth of this child, who was Born Alive at San Jose, Cal.
on the date above stated. 2/1/7 (Born alive or stillborn) (Hour A. M. or P. M.)

(25) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(20) **Wilmington**

(Signature of Witness necessary only
when question 33 is signed by mark)

(27) Filed Sept 22 1922

(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.

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