

(1) PLACE OF BIRTH

County of RichlandTownship of Lova

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.)

(2) Full Name of Child Lizzie Parker(3) ☒ BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth
To be answered only in event of Twins or Triplets(6) Are No Parents Married?(7) DATE OF BIRTH Aug 16 1916
(Name of Month) (Day) (Year)

(8) FULL NAME

FATHER.

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE Wm(11) AGE AT LAST BIRTHDAY 20

(Years)

(12) BIRTHPLACE SC(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 1

(14) NAME BEFORE MARRIAGE

MOTHER.

(15) PRESENT POSTOFFICE OF MOTHER Easton(16) COLOR OR RACE Wm

(17) AGE AT LAST BIRTHDAY

(Years)

(18) BIRTHPLACE SC(19) OCCUPATION Housewife(20) 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 alive at 11 9 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Paul W. Walker(24) State whether Physician or Midwife (25) Address of Physician or Midwife Medicine

Given name added from a supplemental report

1916

Registrar

(26) Witness

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

(27) Filed Aug 19 1916

(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.