

Inc. Town of ..... or ..... Registration District No. 4207. Registered No. 314  
(For use of Local Registrar)  
City of ..... (No. .... Ward)  
(If birth occurs in a hospital or other institution give name of same instead of street and number.)  
(2) Full Name of Child James Immerson 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>	(5) Number in order of birth <u>3</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 23, 1906</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>James Immerson</u>			(14) NAME BEFORE MARRIAGE <u>Bessie Hudson</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Union St</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Union St</u>	
(10) COLOR OR RACE <u>White</u>			(16) COLOR OR RACE <u>White</u>	
(11) AGE AT LAST BIRTHDAY <u>33</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>26</u> (Years)	
(12) BIRTHPLACE <u>Barterburg</u>			(18) BIRTHPLACE <u>Union St</u>	
(13) OCCUPATION <u>Pr. of Acad.</u>			(19) OCCUPATION <u>Teacher</u>	
(20) Number of children born to mother, including present birth <u>3</u>			(21) Number of children of this mother now living, including present birth <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was colored at 9 P. M. on the date above stated. (Born alive or stillborn) (Hour, M., or P. M.)

(23) (Signature) D. H. Montgomery  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Union St

Given name added from a supplemental report  
..... 1st.....  
.....  
Registrar

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)  
(27) Filed June 25, 1906 (28) L. H. Garratt 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.

STATE PRINTING. WITH UNFOLDING INK.—THIS IS A PERMANENT RECORD.  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 2.

N. W. of Columbia