

(1) PLACE OF BIRTH

County of Chas.Township of Or. Paul

Inc. Town of

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 Mahida Jackson

File No. For State Registrar Only

76148

Registration District No. 910 Registered No. 32
(For use of Local Registrar)(3) Boy or Girl? g (4) Twin or Triplet? ✓ (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 9 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Harriet Jackson(9) PRESENT POSTOFFICE OF FATHER Adams Run(10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 23 (Years)(12) BIRTHPLACE Adams Run P.C.(13) OCCUPATION Laborer

(20) Number of children born to mother, including present birth {

MOTHER.

(14) NAME BEFORE MARRIAGE Julia Thompson(15) PRESENT POSTOFFICE OF MOTHER Adams Run(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Adams Run P.C.(19) OCCUPATION Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Armed at Adams Run M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Dr. J. H. Jackson(24) State whether Physician or Midwife (25) Address of Physician or Midwife Adams Run

Given name added from a supplemental report

....., 191.....

Registrar

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

(27) Filed Sept 26 1916 (28) J. D. McCalland 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.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING 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 5.

Cay. of Columbia.