

STOPS PLACED WITH REGARD TO INTEREST IN A FARMER'S INQUIRY.
 2. IN USE OF TWINE OR TRIPLET, use a REFRIGERATE PLANT FOR EACH CHILD, and mark the
 FIRST-HORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

Registration District No. 4306 Registered No. 2
(For use of Local Registrar)

City of (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 Sandy Brown

(3) BOY OR GIRL

Boy

BIRTH Jan 24 1922
(Month) (Day) (Year)

FATHER

(8) FULL NAME

(11) AGE AT LAST BIRTHDAY (Yr)

Unknown

(11) AGE AT LAST BIRTHDAY

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

(14) NAME BEFORE MARRIAGE

(15) PRESENT
POSTOFFICE
OF MOTHER

(16) COLOR
OR
RACE

(16) BIRTHPLACE

(1B) OCCUPATION

Farm laborer

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(20) **Witness**

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

(27) Filed 4/1/50

1922 (25) 4.11.1922

*When there was no attending physician or midwife, then the father, householder, etc. should make this report. 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.