

(1) PLACE OF BIRTH

County of Rich. Land Co.

Township of

or

Inc. Town of Bellevue

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 James Peake

File No. — For State Registrar Only

30073

Registered No. 72
(For use of Local Registrar)(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth
To be answered only in event of Twins or Triplets(6) Are Parents Married? yes(7) DATE OF BIRTH Feb. 19, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charles Peake(9) PRESENT POSTOFFICE OF FATHER Blaney St.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 45
(Years)(12) BIRTHPLACE Richland Co.(13) OCCUPATION farming(20) Number of children born to mother, including present birth 12

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Kelly(15) PRESENT POSTOFFICE OF MOTHER Blaney St.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 42
(Years)(18) BIRTHPLACE Richland Co.(19) OCCUPATION House Maker(21) Number of children of this mother now living, including present birth 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 8 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Amie Porter

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

Amie Porter(26) Witness Elgie Kelly
(Signature) Witness necessary only when question 23 is signed by mark(27) Filed 1/17/22 (28) L. E. Easton
Registrar 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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McGraw-Hill Book Co. 1922. SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

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