

Form No 1.

## (1) PLACE OF BIRTH

County of WilliamsburgTownship of Williamsburg

or

Inc. Town of Williamsburg

or

City of Williamsburg(No. 13 SL: Williamsburg Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child William Harrison

File No. — For State Registrar Only

54092

Registered No. 13

(For use of Local Registrar)

(3) BOY OR GIRL? Boy(4) Twin or Triplet? No

To be answered only in event of twins or triplets

(5) Number in order of birth 1(6) Are Parents Married? Yes(7) DATE OF BIRTH Mar 2, 1911  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME William Harrison(9) PRESENT POSTOFFICE OF FATHER Williamsburg(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 41

(Years)

(12) BIRTHPLACE Williamsburg(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Miss Bess(15) PRESENT POSTOFFICE OF MOTHER Williamsburg(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 40

(Years)

(18) BIRTHPLACE Williamsburg(19) OCCUPATION Housewife(21) 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 born alive M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) William Harrison(24) State whether Physician or Midwife (25) Address of Physician or Midwife Williamsburg

Given name added from a supplemental report

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

(27) Filed Mar 3, 1911 (28) William Harrison 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.

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.

McCaw, of Columbia