

(1) PLACE OF BIRTH

County of Union

Township of

or

Inc. Town of

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 Joseph Peter

File No.—For State Registrar Only

20374

Registration District No. 42 Registered No. 16

(For use of Local Registrar)

(No. Porter 27 St.; Ward)

If child is not yet named, make supplemental report as directed

3 SEX OR GIRL? Boy 4 Twin or Triplet? No 5 Number in order of birth 4 6 Are Parents Married? yes 7 DATE OF BIRTH 6 7 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

8 FULL NAME Elmore Jeter9 PRESENT POSTOFFICE OF FATHER Union10 COLOR OR RACE Colord. (11) AGE AT LAST BIRTHDAY 35 (Year)12 BIRTHPLACE Union13 OCCUPATION Fireman14 Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Blanche Pennick(15) PRESENT POSTOFFICE OF MOTHER Union(16) COLOR OR RACE Colord. (17) AGE AT LAST BIRTHDAY 34 (Year)(18) BIRTHPLACE Union(19) OCCUPATION House work(20) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Amanda M. Beth

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife 22 Pennick St.

Given name added from a supplemental report

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

(27) Filed 7-10 19 22 (28) D. G. Jarrett 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.
 X. 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.