

THIS IS A PREPARED BLANK FOR EACH CHILD, and mark the
 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.

(1) PLACE OF BIRTH

County of Lancaster

Township of Jackson

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.)

Registration District No. 2903 Registered No. 53

(For use of Local Registrar)

(No. St. Ward)

(2) Full Name of Child Lanamae Walker (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Oct 27 1922

To be answered only in event of Twins or Triplets

(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Butler Walker</u>	(14) NAME BEFORE MARRIAGE <u>Ethel Cannon</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Henrico, Va.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Henrico, Va.</u>
(10) COLOR OR RACE <u>Color</u>	(16) COLOR OR RACE <u>Color</u>	(11) AGE AT LAST BIRTHDAY <u>21</u>	(17) AGE AT LAST BIRTHDAY <u>18</u>
(12) BIRTHPLACE <u>Richmond, Va.</u>	(18) BIRTHPLACE <u>Newberry, Va.</u>	(13) OCCUPATION <u>Farming</u>	(19) OCCUPATION <u>Farming</u>
(20) Number of children born to mother, including present birth <u>2</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Lanamae Walker at 10 A. M. on the date above stated. (Born alive or stillborn) (How A. M. or P. M.)

(23) (Signature) Midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Matthia Gudrun

Given name added from a supplemental report

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

(27) Filed Oct 27 1922 (28) Willie C. Peland 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.