

19778

City of Baltimore Registration Number 500 R Registered No. 15
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St. Ward)

(1) Full Name of Child Paul Ritz If child is not yet named, make supplemental report as directed

Sex Male (2) Type X (3) Number of Children X (4) Date of Birth July 19 1923
 (Name of Month) (Day) (Year)

FATHER
 (1) Full Name Marcello Ritz
 (2) Present Residence of Father 1111
 (10) Color White (11) Age at Last Birthday 33
 (12) Birthplace Italy
 (13) Occupation Fireman
 (14) Number of children born to mother, including present birth 1

MOTHER
 (10) Name before Marriage Ollie Chadwick?
 (11) Present Residence of Mother 1200 N. 7th St
 (12) Color White (13) Age at Last Birthday 31
 (14) Birthplace Italy
 (15) Occupation Domestic
 (16) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was July 19 1923 at 10 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(21) (Signature) Luffie Church
 (22) State whether Physician or Midwife Midwife (23) Address Baltimore

Given name added from a supplemental report c. Chadwick
 (24) Witness L. Chadwick (25) Signature of Witness necessary only when question 23 is signed by mark
 (26) Date July 20 1923 (27) 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.