

2900

State Board of Health

(For use of Local Registrar)

(For use of Local Registrar)

(For use of Local Registrar)

(For use of Local Registrar)

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

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

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents	(7) DATE OF
------------------	----------------------	------------------------------	-----------------	-------------

GENDER <u>girl</u> To be answered only in event of Twins or Triplets	ORDER OF BIRTH <u>1</u> Parents Married? <u>yes</u>	BIRTH <u>Feb. 25, 1972</u> (Name of Month) (Day) (Year)
---	--	--

MOTHER

(8) FULL NAME Andrew Batten (14) NAME BEFORE MARRIAGE Liz's parent

(9) PRESENT POSTOFFICE OF FATHER. *Lawrence St.*

OF FATHER Angley St OF MOTHER Angley St

(10) COLOR (11) AGE AT LAST 33 (16) COLOR (17) AGE AT LAST

OR RACE White BIRTHDAY 31 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30
(12) BIRTHPLACE (Years) (Years)

(18) BIRTHPLACE Pikeville, Tenn.

(13) OCCUPATION	Aspen 60 SE
(18) OCCUPATION	Aspen 60 SE

Domestic

20) Number of children born to mother, including present birth 3

on the date above stated.

(23) (Signature) Harriet Redwards

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

(20) Witness *Mary E. Spradley*

(Signature of Witness necessary only
when question 27 is signed by mark)

 Andrew J. Laidlaw

(27) Filed Mar. 1, 1937 (28) J. W. Spradley
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.

McGraw-Hill, Columbia, S. C.