

File No.—For State Registrar Only  
18664

County of Flomance  
Township of Namuda  
or  
Inc. Town of .....  
or  
City of .....

Registration District No. 2016 Registered No. 10  
(For use of Local Registrar)

City of ..... (No. .... St.; ..... Ward)  
 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

(2) Full Name of Child William Lamar Miss { If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? <u>1</u>	4) Twin or Triplet?	5) Number in order of birth	6) Are Parents Married? <u>Yes</u>	7) DATE OF BIRTH <u>May 8, 1922</u> (Name of Month) (Day) (Year)
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**FATHER.**

5) FULL NAME James C. Wise

9) PRESENT  
POSTOFFICE  
OF FATHER *Benson*

(10) COLOR OF RACE *White* (11) AGE AT LAST BIRTHDAY *28* (Years)

12. BIRTHPLACE

13 OCCUPATION farmer.

29) Number of children born to mother, including present birth Four

MOTHER.

(14) NAME BEFORE MARRIAGE *Mrs Ann Poston*

(15) PRESENT POSTOFFICE OF MOTHER *Kymau SC*

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY..... 27.....  
(Years)

(18) BIRTHPLACE SP

(19) OCCUPATION *Housewife*

(21) Number of children of this mother Four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

CERTIFICATE OF ATTENDING PHYSICIAN *DR. MED. W. H. BARN* at *4 P.M.*  
(22) I hereby certify that I attended the birth of this child, who was *Born alive* (Born alive or stillborn) (Hour A.M. or P.M.)  
on the date above stated. *7-1-1914* *M. A. B.*

(23) (Signature)	<i>Mary A. ...</i>	(25) Address of Physician or Midwife
(24) State whether	Physician or Midwife	

Midway | Phoenix

Given name added from a supplemental report

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

(27) Filed 9 Dec 18 1922 (28) N. J. Testa  
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.

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ED PLAINLY, WITH A BOLD INK—THIS IS A PERMANENT RECORD  
OF TWO OR THREE OF THE SEVERAL PLAINIC FOR EACH CHILD, AND MARK THE  
FIRST-BORN, NO. 1, THE OTHER, NO. 2, etc., in attention to

NEW, 2300 13th corner of Tenth and  
 17th Sts. Columbia, Mo. C.

**Prüfung**