

(1) PLACE OF BIRTH

County of Jefferson

Township of Jefferson

City of Jefferson

State of Missouri

CERTIFICATE OF BIRTH

State of Missouri
Department of Health
Bureau of Vital Statistics
State Board of Health

Registration District No. 211

Registered No. 307

(2) Full Name of Child Raymonia Prather

(a) Sex Boy (b) Age 15 (c) Date of Birth 1915

(d) Name of Father Frank Prather (e) Name of Mother Eureta S.C.

(f) Color Black (g) Age at last birthday 50

(h) Occupation Farmer (i) Occupation Housewife

(j) Number of children born to mother 10 (k) Number of children living 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(12) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) (Date A. M. or P. M.)

(13) (Signature) Daisy Henderson

(14) State whether Physician or Midwife Physician

(15) Name of Physician or Midwife Henderson S.C.

(16) Name of Physician or Midwife M. J. Horton

(17) Name of Physician or Midwife Henderson S.C.

(18) Name of Physician or Midwife Henderson S.C.

(19) Name of Physician or Midwife Henderson S.C.

(20) Name of Physician or Midwife Henderson S.C.