

19437

State Board of Health

(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

BIRTH Jan. 20, 1922.
(Name of Month) (Day) (Year)

MOTHER.

(18) BIRTHPLACE

(19) OCCUPATION

(21) Number of children of this mother now living, including present birth 2

(22) I hereby certify that I attended the birth of this child, who was... Born alive ... at 12:34 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

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

(26) Witness

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

(27) Filed July 10, 1927 (28) Reuben H. Montgomery

*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.

NOTE PLAINLY, WITH UNFADING INCENTIVE IS A PERMANENT RECORD.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN. No. 1 THIS OTHER, No. 2, etc. In question 5