

## (1) PLACE OF BIRTH

County of *Register*Township of *Boonville*

Inc. Town of

City of

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

## (2) Full Name of Child

*Karl Elizabeth Lancaster*

(3) BOY OR GIRL?

*girl*

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of twins or triplets

(6) Are Parents Married?

*yes*

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

*June 10, 1916*

## FATHER.

(2) FULL NAME

*Lamar Lancaster*

(9) PRESENT POSTOFFICE OF FATHER

*Jonesville*

(10) COLOR OR RACE

*White*

(11) AGE AT LAST BIRTHDAY

*41*

(12) BIRTHPLACE

*Union Co*

(13) OCCUPATION

*Farmer*

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

*9*

## MOTHER.

(14) NAME BEFORE MARRIAGE

*Carrie Burgess*

(15) PRESENT POSTOFFICE OF MOTHER

*Jonesville*

(16) COLOR OR RACE

*White*

(17) AGE AT LAST BIRTHDAY

*31*

(18) BIRTHPLACE

*Union Co*

(19) OCCUPATION

*Domestic*

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

*8*

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was *alive* at *7* P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

*Jessie Cannon*

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

*Midwife Jonesville Ky*

Given name added from a supplemental report

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Registrar

(26) Witness

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

(27) Filed

*July 1916*

(28)

*Wm. B. Lancaster*

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.

File No.—For State Registrar Only

66511

Registered No. *23*

(For use of Local Registrar)

WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD. No. 2.—In case of TWINS or TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHERS, No. 2, etc., in question 5.