

MARGIN RESERVED FOR BUILDING

TRAFFIC PLATES WITH UNPAID TAXES—THIS IS A PENALTY. PERSONS WHOSE VEHICLES ARE STOPPED BY THE POLICE SHALL BE REQUIRED TO STOP AND PAY THE TAXES. IF THE TAXES ARE NOT PAID, THE VEHICLE SHALL BE SEIZED AND THE DRIVER SHALL BE FINED. IF THE TAXES ARE NOT PAID, THE VEHICLE SHALL BE SEIZED AND THE DRIVER SHALL BE FINED.

(1) PLACE OF BIRTH

County of Washington

Township of Shiloh

or

Inc. Town of

or

City of (No. St.; Ward)

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

Registration District No. 131 Registered No. 17

(For use of Local Registrar)

File No.—For State Registrar Only

3760

(2) Full Name of Child John B. Smith

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

(3) BOY OR GIRL <u>29</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>July 3, 1922</u> (Name of Month) (Day) (Year)
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FATHER.		MOTHER.	
(8) FULL NAME <u>John B. Smith</u>	(14) NAME BEFORE MARRIAGE <u>John B. Smith</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Shiloh, W. Va.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Shiloh, W. Va.</u>
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>32</u> (Years)	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>28</u> (Years)
(12) BIRTHPLACE <u>Shiloh, W. Va.</u>	(18) BIRTHPLACE <u>Shiloh, W. Va.</u>	(19) OCCUPATION <u>Farmer</u>	(21) Number of children of this mother now living, including present birth <u>7</u>
(13) OCCUPATION <u>Farmer</u>	(20) Number of children born to mother, including present birth <u>7</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) John B. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife
Shiloh, W. Va.

Given name added from a supplemental report

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

(27) Filed 11 19 22 (28) John B. Smith 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.

RECEIVED BY CLERK, COLUMN, S. C.