

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

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 *Mavis S. Smith*

File No.—For State Registrar Only

9306

Registration District No. *41.86*Registered No. *23*

(For use of Local Registrar)

(3) BOY OR GIRL? *Girl*

(4) Twin or Triplet?

(5) Number in order of birth *6*(6) Are Parents Married? *Yes*(7) DATE OF BIRTH *March 7, 1922*

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME *Thomas S. Smith*(9) PRESENT POSTOFFICE OF FATHER *Rembert S.C.*(10) COLOR OR RACE *White*(11) AGE AT LAST BIRTHDAY *24* (Years)(12) BIRTHPLACE *Rembert S.C.*(13) OCCUPATION *Farmer*(20) Number of children born to mother, including present birth *6*

MOTHER.

(14) NAME BEFORE MARRIAGE *Hattie Donkeman*(15) PRESENT POSTOFFICE OF MOTHER *Rembert S.C.*(16) COLOR OR RACE *White*(17) AGE AT LAST BIRTHDAY *20* (Years)(18) BIRTHPLACE *Rembert S.C.*(19) OCCUPATION *Housewife*(21) Number of children of this mother now living, including present birth *6*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at *6 P.M.* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *D. C. Carter*(24) State whether Physician or Midwife *Midwife*(25) Address of Physician or Midwife *Rembert S.C.*

Given name added from a supplemental report

(26) Witness *M. C. Hattley*

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

(27) Filed *March 6, 1922*(28) *M. C. Hattley*

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.

WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 IN CASE OF TWIN OR TRIPLET, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 CHILD'S POSITION, No. 1, THE OTHER, No. 2, ETC., IN QUESTION 5.

RECORD OF BIRTHS, COLUMN, B. C.

MARK THE CHILD'S POSITION