

Form No. 1

(1) PLACE OF BIRTH

County of Norfolk
 Township of Felby
 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.)

(2) Full Name of Child Rose Reeves

File No.—For State Registrar Only

30760

Registration District No. 2508 Registered No. 75
 (For use of Local Registrar)

(3) BOY OR GIRL? Boy (4) Twin Twins (5) Number in order of birth Two (6) Are Parents Married? yes (7) DATE OF BIRTH Sept-19 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ed Reeves
 (9) PRESENT POSTOFFICE OF FATHER Tobacco N.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE L.C.
 (13) OCCUPATION Farm work

MOTHER.

(14) NAME BEFORE MARRIAGE Ladie Jones
 (15) PRESENT POSTOFFICE OF MOTHER Tobacco N.C.
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 23 (Years)
 (18) BIRTHPLACE L.C.
 (19) OCCUPATION House work

(20) Number of children born to mother, including present birth 6

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 11:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Graham(24) State whether Physician or Midwife (25) Address of Physician or Midwife Midwife Tobacco N.C.

Given name added from a supplemental report

(26) Witness Ed Reeves (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Sept 27 1922 (28) Ed Reeves 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.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 5.
 BUREAU OF COLUMBIA, COLUMBIA, S. C.