

TRANSCRIPTION OF BIRTH RECORD

Year:	Vol:	Page:	Reg. no:
Town Reporting:		County:	
Place of Birth:			
Name:			
Date of Birth:			
Sex:	Color:	Time:	Weight:
Father:		Mother: (Maiden name):	
Birthplace:		Birthplace:	
Age:	Occupation:	Age:	Occupation:
Residence:		Residence:	
Attending Physician:		Informant:	
Address:		Address:	
Date Recorded:		Registrar:	

Transcriber: _____ Date: _____