

STATE OF NEW JERSEY.

BUREAU OF VITAL STATISTICS.

USE INK  
AND  
WRITE PLAINLY

# Certificate and Record of Birth. 976

Name of child Dorothy Eleanor Weecest  
(In full if possible.)

Sex Female Color White Date of birth May 15 1919

Place of birth #1460 Haddon Ave., Camden N.J.  
[If in city, give name, street and number; if not, give township and county.]

Name of father Herbert E. Weecest Father's birthplace U.S.  
(If out of wedlock, write O. W.)

Maiden name of mother Ellen Hague Mother's birthplace U.S.

Age of father 26 y 00 Occupation of father Pipe Fitter

Age of mother 21 y 00 Occupation of mother Housewife

Number of children in all by this marriage 1 Number of children now living 1

Name and P. O. address of professional attendant in own handwriting.

What preventive for  
ophthalmia neonatorum  
did you use? If none state  
the reason therefor.

Date of this report

Emma E. Howell  
(Signature of professional attendant.)

125 W. 1st St.  
(P. O. address.)