

amended

# REGISTRATION OF BIRTHS.

## PLACE OF BIRTH

County of Wauwaukee  
 Township of \_\_\_\_\_  
 or \_\_\_\_\_  
 Village of \_\_\_\_\_  
 or \_\_\_\_\_  
 City of Wauwaukee

No. 6001

The corrections entered in red on the adjoining birth record were made this 11th day of July, 1923 by me and are based on affidavit of self  
*Walter C. Campbell*  
 REGISTER OF DEEDS

Ward No. 1109 Cold Spring Ave. St.; 15 Ward

Full Name of Child William Rathkamp

Date of Birth July Month 25 Day, 1929 Year

## PERSONAL AND STATISTICAL PARTICULARS.

Sex of Child <u>M.</u>	Color or Race of Child <u>W.</u>	Twin, Triplet, or other?	and	Number in order of birth	Legitimate? <u>yes</u>
FATHER <u>Rathkamp</u>			MOTHER <u>Hassell</u>		
Full Name <u>William Rathkamp</u>			Full Maiden Name <u>Olive Hassell</u>		
Residence <u>1109 Cold Spring Ave.</u>			Residence <u>1109 Cold Spring Ave.</u>		
Color or Race <u>W.</u> Age at Last Birthday <u>31</u> Years			Color or Race <u>W.</u> Age at Last Birthday <u>22</u> Years		
Birthplace <u>America</u> State or Country			Birthplace <u>America</u> State or Country		
Occupation <u>Carpenter</u>			Occupation <u>Housewife</u>		
Number of Child of this Mother? <u>2</u>	Number of Children of this Mother, now living? <u>1</u>	Was prophylaxis used to prevent ophthalmia neonatorum? See Ch. 59, laws of 1909.			

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

I HEREBY CERTIFY, That I attended the birth of this child, and that it occurred on July 25, 1929, at 4 P. M.

(Signature) L. Hess

{ When there was no attending physician or midwife, then the father, { householder, etc., should make this return.

Given name added from a supplemental report

Address 903 Walnut St.

Filed July 31, 1929

Local Registrar.

G. A. BADING Local Registrar.

Recorded FEB 16 1912

M. S. Registrar.

Jacob Hanger Register.

Register.