01972606A

Let Superintendent Registrar.

[FORM to be used for making out Occasional Copies of Entries of BERTHS for transmission to the Registrar-General, and for no other purpose.] 43 BIRTHS Registered in the District of Date and Piace of Birth. No. Name (if any). Name and Surname and Dwelling-place of Father. Name and Survame and Maiden Surname or Mother. Signature, Qualification, and When Registered Rank or Profession of Father. Signature of Registrar. (1) (7.) (IO) (II.i

and for no other purposed

I have examined the above, and have compared it with the said original Ecgistrar's Book, and hereby certify that it is a true copy. Witness my hand this_ day of_

[Births S.]