



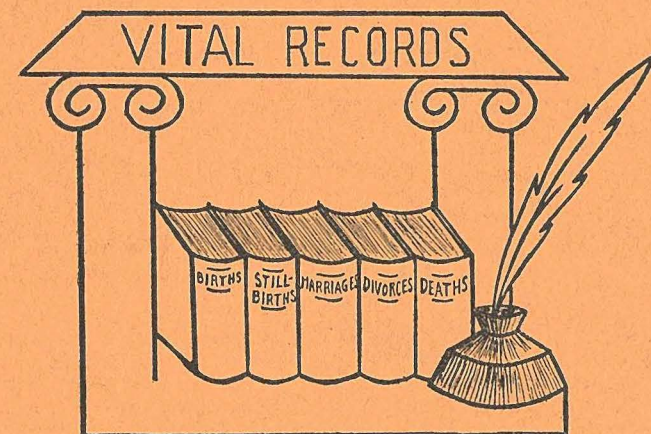
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State of Iowa
1945

INSTRUCTION MANUAL

For Preparation
of

VITAL RECORDS



Prepared by
Division of Vital Statistics
IOWA STATE DEPARTMENT OF HEALTH

Published by
THE STATE OF IOWA
Des Moines

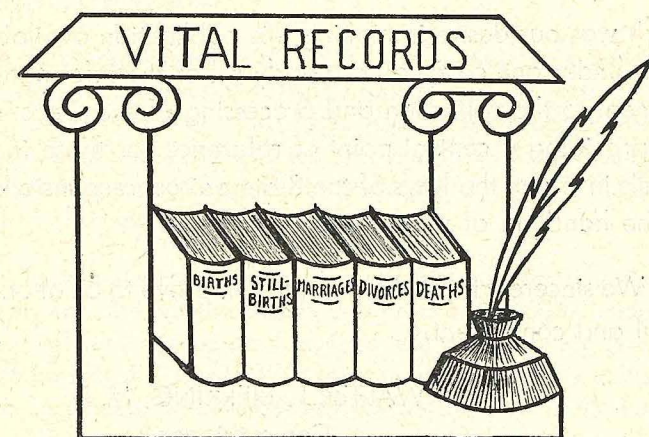
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LOCAL REGISTRAR

Appointment. Local Registrars are appointed by the County Registrar, with the approval of the county board of supervisors, for an indefinite period of time. A copy of such appointment showing the effective date shall be kept as a permanent record in the office of the County Registrar and a copy forwarded to the State Registrar.

Qualifications. The Local Registrar shall have the following qualifications:

- (1) He shall reside in the registration district.
- (2) He shall be a person of high standards and have the respect of the community.
- (3) He shall be actively interested in the registration of all births, deaths and stillbirths occurring in his registration district, since his position is one of honorary rather than remunerative nature.

Registration District. A definite registration district is assigned to each Local Registrar by the County Registrar. Such registration area is given a district number by the County Registrar. The Local Registrar shall be notified by the County Registrar of any consolidation or change in the registration district or its district number.

Deputy Local Registrar. Immediately after appointment, the Local Registrar shall appoint a Deputy Local Registrar to act in his place in case of absence or disability. Such appointment shall be made in writing, and so accepted by the Deputy Local Registrar.

The Deputy Local Registrar is subject to all laws and rules governing Local Registrars.

Sub-registrar.—Sub-registrars are appointed by the County Registrar to cover certain areas within registration district that are not easily accessible to the Local Registrar. Such appointments are conferred on funeral directors for the purpose of permitting them to issue burial permits which cannot conveniently be secured from the Local Registrar.

Sub-registrars do not receive a fee, such fees being paid to the Local Registrar.

Removal. In accordance with the law, any Local Registrar who is negligent in his duties shall be removed by the State Department.

Supplies. All blank certificates and other forms necessary for the registration of births, deaths and stillbirths by the Local Registrar shall be secured from the County Registrar. Franked envelopes are to be used only in connection with the current registration program.

Responsibility. The Local Registrar, subject to the direction and supervision of the State Registrar, is responsible for the complete and accurate registration of all births, deaths, and stillbirths in his designated registration district. He should be thoroughly familiar with the pertinent portions of the vital statistics laws contained in this manual, as well as with other rules and regulations issued by the State Department. All information regarding illegitimate birth records shall be strictly confidential.

Completion of certificates. Detailed instructions for completion of birth, death and stillbirth certificates are given with illustrations in another section of this manual.

Ten-day limit and responsibility for filing birth certificates.—Within ten days

a certificate of every birth shall be filed with the Local Registrar of the district in which the birth occurred, by the physician or midwife, or if not so attended, by one of the parents, the householder or owner of the premises where the birth occurred, or the manager or superintendent of the public or private institution in which the birth occurred.

Prepare birth certificate. If such parent, householder, or manager is unable to prepare a birth certificate, the Local Registrar shall secure the necessary information from any person having knowledge of the birth and prepare and file the certificate.

Three-day limit and responsibility for filing death or stillbirth certificates. The person in charge of interment shall file with the Local Registrar of the district in which the death or stillbirth occurred, a certificate of death or stillbirth within three days after the occurrence.

Obtain death data from attendant or coroner. In preparing a certificate of death or stillbirth the person in charge of interment shall obtain and enter on the certificate the personal data required from the persons best qualified to supply them. He shall present the certificate of death or stillbirth to the physician last in attendance or to the coroner having jurisdiction who shall thereupon certify the cause of death or stillbirth according to his best knowledge and belief.

Issue burial permit. Upon receipt of a properly executed and complete death or stillbirth certificate, the Local Registrar shall issue a burial permit, as desired, to the undertaker or other person in charge. See Section 2318 under laws relating to disposal of dead bodies.

Must examine certificates. All birth, death and stillbirth certificates must be examined carefully for completeness and accuracy when received.

Typewritten or legible hand. They should all be typewritten or legibly written in dark, unfading ink.

Secure additional and/or correct data. If any birth, death or stillbirth certificate is incomplete or unsatisfactory, except for attendant's signature, the Local Registrar shall obtain the complete or correct information and note same on a separate sheet of paper and attach to the original certificate. This information will be entered on the certificate by the State Department.

Return certificate for signature of attendant. If any certificate is received that does not bear the signature of the attendant, the Local Registrar shall prepare a copy of such certificate to be retained in his office and take or send the unsigned original certificate to the attendant for signature. A careful check should be kept to see that all such certificates are returned within a reasonable length of time. When the signed original certificate is received, the copy prepared by the Local Registrar may be destroyed.

Secure new certificate if illegible. If any certificate is illegible, the Local Registrar shall obtain a new certificate. In such instance, the Local Registrar shall prepare as much of the new certificate as possible and take or send it to the attendant for completion and signature, retaining the original certificate until the new certificate is returned.

Not to alter certificates. No certificate of birth, death or stillbirth, after its acceptance for registration by the Local Registrar, shall be altered or changed in any respect.

Numbers certificates. Upon receipt of complete and correct certificates, the Local Registrar shall number them consecutively in three separate series, begin-

ning with number one for the first birth, number one for the first death, and number one for the first stillbirth at the beginning of each calendar year.

NOTE: This will constitute a change in numbering procedure in many local offices where the stillbirths have been numbered both as a birth and a death. No separate book is necessary for recording stillbirths, as the last page in the death record book should be reserved for that purpose.

Signature and receipt date. Properly completed certificates shall be signed by the Local Registrar and the date on which each certificate is received by him shall be placed on the certificate.

Record books. The Local Registrar must enter each current certificate of birth, death and stillbirth in the proper record book supplied by the State Registrar, to be preserved as the permanent local record. Stillbirths shall be recorded on the last page in the death record book. Upon termination of his services, the Local Registrar shall turn his record books and supplies over to his successor.

NOTE: Only certificates of events occurring in your registration area should be recorded in your record books. Should you receive a certificate where the event occurred outside of your registration district, the certificate should be returned to the proper Local Registrar or to the County Registrar in the county where the event occurred.

Transmits certificates by third of month. On the third day of each month, the Local Registrar shall transmit to the County Registrar, in a stamped return envelope furnished by the State Registrar, all original certificates of birth, death and stillbirth registered by him for the preceding month. Local Registrar's **STATEMENT OF RETURNS** shall also be transmitted to the County Registrar. If at any time the County or State offices should desire that certificates be submitted more often than once each month, the Local Registrar shall conform to such request.

Submission of no report card. If no births, deaths or stillbirths occur in his registration district in any month, the Local Registrar shall on the third day of the following month report that fact to the County Registrar, and a card provided for that purpose should be mailed to the State Office.

Fees for certificates. The Local Registrar is paid twenty-five (25) cents for each certificate of birth or death occurring in his registration district.

Fees for no report. He is also paid twenty-five (25) cents for a report of no births, deaths, or stillbirths for any given month.

Receives no payment for events outside district. No payment can be received by Local Registrars for other than births, deaths and stillbirths occurring in his designated registration district.

Time of fee payments. Local Registrars are paid quarterly, except in some cities having a population of 10,000 or more, in which case they are paid monthly. Such fees are paid by warrant out of the general funds of the county in which the registration district is located, upon certification by the State Registrar to the county auditor.

All certifications for fees due are made out in the name of the duly appointed Local Registrar who shall distribute the pay due the Local Deputy Registrar for his services in accordance with arrangements made between them.

Not to issue certified copies. Certified copies of birth and death certificates are issued by the State or County Registrar only, upon the request of any applicant for proper purpose.

Not to accept delayed birth records. Any live birth registered five years or

more after the occurrence of the birth shall be filed on a delayed certificate form by the County or State Registrar upon receipt of satisfactory evidence as required by the State Department.

Procedure for burial in district other than place of death. When a death occurs in one registration district and the body is to be moved into another registration district within the state for burial, the burial permit should be secured from the Local Registrar of the registration district in which the death occurred, if possible. In cases where it is impossible to secure a death certificate or burial permit without delay, the funeral director shall:

- (1) Prepare "Notice of removal" form in triplicate.
- (2) Send the original copy of such form to the State Registrar.
- (3) Leave or mail the second copy of such form to the Local Registrar of the registration district in which the death occurred and from which the body is being moved.
- (4) Retain the third copy for use in securing the courtesy burial permit from the Local Registrar in the registration district in which the burial is to take place. (See note following item 2 of section 2318 of the vital statistics law pertaining to disposal of dead bodies.)
- (5) Forward the original death certificate to the Local Registrar of the registration district in which death occurred and from which the body was removed.

NOTE: In instances where the funeral director does not know who is Local Registrar of the district of occurrence, he may send the second copy of the "notice of removal" form and the original death certificate to the County Registrar of the county where the death occurred.

This alternate procedure is approved as a matter of convenience for the duration of the war.

Transmits burial permits by third of month. Beginning July 1, 1945, the Local Registrar shall forward to the County Registrar, by the third of each month, all burial permits returned by sextons or funeral directors after interment. The County Registrar will transmit all such burial permits to the State Registrar.

Must report violations. The Local Registrar shall make an immediate report to the State Registrar of any violation of the law relative to the registration of vital statistics and the disposal of dead bodies of which he has knowledge.

COUNTY REGISTRAR

Clerk of District Court is county registrar. The clerk of the district court shall be the County Registrar of the county in which he is the clerk.

Appoints deputy. He shall appoint one of his deputy clerks of court as Deputy County Registrar who shall act in his place in case of his absence or disability. The County or Deputy County Registrar cannot receive a fee for his services as registrar, since this was made part of his duties as clerk by the 49th General Assembly.

Appoints local registrar. The County Registrar shall, with the approval of the board of supervisors, appoint as many Local Registrars as are, in his opinion, necessary to assure complete and accurate registration of all births, deaths and stillbirths in the county.

Except that Local Registrars in cities having a population of thirty-five thousand or more, shall be appointed by the local board of health.

Sends copy of appointments to state. A copy of appointments and assignments and re-assignments of districts shall be kept as a permanent record in the office of the County Registrar and a copy forwarded to the State Registrar. These copies should specify the date of appointment or termination of service.

Assigns definite district. The County Registrar shall assign a definite registration district and its district number to each Local Registrar, except in cities over thirty-five thousand population.

May consolidate districts. The County Registrar may consolidate or otherwise change registration districts. In such cases he shall notify the Local Registrars effected and designate the district number.

Prepares list of local registrars. The County Registrar shall prepare, keep current, and supply to all physicians, hospitals and undertakers in his county a list of the Local Registrars, their designated registration district, and the number of such district.

Supplies. The county Registrar shall secure from the State Registrar an adequate supply of blank certificates, other forms, record books and envelopes and shall in turn issue such supplies to his Local Registrars.

Receives certificates from local registrar by third of month. It is the responsibility of the County Registrar to see that all Local Registrars transmit birth, death and stillbirth certificates to the County Registrar on or before the third day of each month.

Must examine certificates. Upon receipt of such certificates, the County Registrar or his deputy shall examine them for completeness and accuracy. All certificates should be typewritten or legibly written in dark unfading ink.

NOTE: For proper completion of certificates, see "Item instructions for preparation" of birth, death and stillbirth.

If upon examination of the certificates it is found that the Local Registrar has not secured complete and accurate information or the attendant's signature on any certificate, the County or Deputy County Registrar shall follow the instructions outlined for Local Registrars relative to securing such completion, correction or signature, see page 5. The Local Registrar shall be notified of these instances.

To sign for Local Registrar. If any certificate does not bear the signature of the Local Registrar and date received, the County Registrar shall complete it and so advise the Local Registrar.

Makes permanent record. After careful examination of each birth, death and stillbirth certificate, the County Registrar shall make an alphabetical index and

a permanent record of each certificate in a record book approved by the State Registrar.

Transmits certificates to State Registrar by tenth of month. On the tenth day of each month the County Registrar shall transmit to the State Registrar, in a stamped return envelope furnished by the State Registrar, all original certificates of birth, death and stillbirth occurring in his county during the preceding month. Certificates received indicating place of occurrence as another county should be sent to the County Registrar in which the event occurred. The Local Registrar's **STATEMENT OF RETURNS** should also be sent to the State Registrar.

To make minor amendments. Minor errors on birth and death certificates may be corrected upon proper completion of the amendment form furnished by the State Registrar. The original copy of the amendment shall be submitted to the State Registrar.

Major changes or corrections shall require such documentary evidence as is deemed necessary by the State Registrar to preserve the legality of the certificate. All corrections on marriage certificates will be referred to the State Registrar.

State Registrar handles adoptions and legitimations. In connection with adoptions and legitimations, the State Registrar shall handle the record changes pertinent to the vital records and procedure will be worked out by the state office in order that the necessary corrections can be made in the county office. All illegitimate birth records and adoption proceedings shall be strictly confidential.

The clerk of court shall submit on a form furnished by the state office an abstract of every adoption decree filed in his office. These completed abstracts will be sent to the state office once each month where the new birth records will be prepared.

Files delayed birth certificates. Any birth registered more than five years after occurrence shall be filed on a delayed certificate form by the County or State Registrar. Only unrecorded births which occurred in Iowa may be registered by means of a delayed registration in Iowa. All County Registrars should record and properly index all births occurring in his county that are registered by the delayed registration procedure. Delayed certificate forms are supplied by State Registrar upon request.

A delayed birth record for a child under twelve years of age may be established by affidavit of parent, physician or other person knowing the complete facts of the birth and shall be made on the form furnished by the State Department.

Documentary evidence is required to establish a delayed birth record for anyone over twelve years of age. A minimum of two documents is necessary, one showing the birthdate or age and the other the birthplace and the evidence must be over five years old.

Fee for certified copy of delayed certificate. The fee for a certified copy of a delayed certificate shall be fifty cents.

Submits delayed certificates by tenth of month. All original certificates of delayed registration shall be transmitted to the State Registrar by the tenth of each month.

Keeps record books for marriages and divorces. The clerk of the district court in each county shall keep a record book for marriages and a record book for divorces. The form of these record books shall be uniform throughout the

state and shall be prescribed by the State Department, however, they shall be procured at the expense of the county.

Contents for marriage record. The record book for marriages shall show the same items and personal particulars for each marriage solemnized in the county as are required in the return of a marriage. Items to be entered in the marriage record book shall be taken from the original return of marriage.

Contents for divorce record. The record book for divorces shall show the following items for each divorce granted in the county:

- (1) Full name, color, age, nationality, and number of prior marriages of each of the parties.
- (2) Date of marriage.
- (3) Cause of divorce.
- (4) Date of divorce.
- (5) Person to whom divorce granted (husband or wife).
- (6) Such additional data respecting each divorce as the state department may prescribe.

Source of entries for divorces. Information for the items to be entered in the divorce book respecting each divorce shall be taken as far as possible from the court records. The other data necessary to complete the entries shall be supplied by the parties to the action or by their attorneys.

Transmit returns of marriages and copy of divorce entries by tenth of month. On the tenth day of each month, the County Registrar shall transmit to the State Registrar all original returns of marriages and copy of the entries made in the record book for divorces, for such events occurring during the preceding month. Forms for reporting divorces are supplied by the State Registrar.

NOTE: In practice it has proven more efficient and satisfactory to have these records transmitted on a monthly rather than annual basis.

May issue certified copies. Only the State or any County Registrar shall, upon request, supply to any applicant for any proper purpose, a certified copy of the record of any birth, death, stillbirth or marriage registered. For making and certifying to such record, a fee of fifty cents shall be charged. (It should be noted that the maximum charge of fifty cents includes both preparation and certification.) All such certified copies should include the filing date of the record being certified.

No records prior to 1880. Birth, death, and marriage records on file with the State Registrar date from the year of 1880. Any birth occurring prior to 1880 will necessitate filing by delayed registration procedure.

Supervision. County Registrars are responsible to the State Registrar and are subject to all laws, rules and regulations pertaining to registration of vital statistics.

PHYSICIAN

Responsibility. The physician by Iowa Law is responsible for preparing and filing a complete birth certificate for every live birth he attends. He is responsible for filling out the medical part of death and stillbirth certificates for such events attended by him.

Physicians are governed by all vital statistics laws, rules, regulations and penalties.

Completion of certificates. Detailed instructions for completion of birth, death and stillbirth certificates are given with illustrations in another section of this manual.

Ten-day limit for filing birth certificate. Within ten days after each birth there shall be filed with the Local Registrar of the district in which the birth occurred, a certificate of such birth, filled out by typewriter or legibly written in dark unfading ink.

Multiple births. Twins and other multiple births must be reported on separate certificates.

Incomplete certificates. If a certificate of birth is incomplete, the Local Registrar will immediately notify the physician or other informant and require him to supply the missing items of information.

Every physician making a return of a birth, who may be questioned in relation thereto, shall answer correctly and to the best of his knowledge, all questions put to him by the Local, County or State Registrar for information needed to make a complete record of the birth, and the physician shall verify such statement by his signature, when requested to do so.

Medical certification, death and stillbirth. Although the responsibility for the proper execution of a stillbirth or death certificate rests with the undertaker or other person in charge of the funeral or disposition of the body, the medical certification shall be furnished by the attending physician, and should be printed or typed. In case of death without medical attendance the certification shall be made by the coroner. Each informant shall certify to the particulars supplied by him by signing his name below the list of items furnished.

Procedure for registration of illegitimate births. A child born out of wedlock shall be recorded under the maiden name of the mother. No information will be shown regarding the father unless a notarized affidavit signed by the father admitting paternity of the child is submitted with the birth record.

NOTE: When paternity of a child has been established by court action the father's information can be added to the certificate upon submission of a certified copy of the court decree to the State Registrar.

A child born to a mother who is legally married is not considered illegitimate, since it is presumptive evidence that the husband is the father of the child and should be recorded as such unless paternity has been otherwise established through court action.

Legitimation procedure. By subsequent marriage of the parents of an illegitimate child the birth becomes legitimate.

NOTE: Upon submission to the State Registrar of a certified copy of the marriage certificate and notarized statement signed by the father admitting paternity of the child, the birth certificate will be completed as a legitimate birth.

Supplies. All blank certificates and other supplies necessary to accomplish proper registration should be secured from your Local Registrar.

HOSPITAL

Cooperation is voluntary. The Iowa Law places the responsibility for preparing and filing a complete birth certificate for every live birth on the physician in attendance. However, in many instances in Iowa, the hospitals are sharing this responsibility on a voluntary cooperative basis. Registration officials are most appreciative of this interest and assistance and it is with this thought in mind that this section is included in the manual.

Detailed instructions for completing certificates. Detailed instructions for completion of the birth certificate, item by item, are given with illustrations beginning on page 17.

Suggested procedure to follow in preparing certificates. There are various satisfactory methods of insuring accuracy and completeness in the preparation of birth certificates. The two methods shown below have proven quite successful in application:

1. **Using stub as data source.**
 - a. Have the stub of the certificate prepared as soon after the delivery as possible, securing the information from the mother, father or other individual at hand in possession of the facts.
 - b. Have the certificate typed or legibly written in dark unfading ink, from the stub data, (it is desirable to have one permanent employee prepare all certificates).
 - c. Have the mother carefully examine the completed certificate before she leaves the hospital so that all omissions and errors can be rectified before the physician signs the certificate.
 - d. Upon completion, attach the birth certificate to the mother's hospital record so that the attending physician can sign it on his regular hospital round so it may be transmitted at the proper time.
2. **Alternate, using facsimile of certificate as data source.**
 - a. Give the mother a facsimile of the birth certificate to be completed by her at her leisure as soon after the birth as seems feasible, (mimeographed facsimile forms will be furnished by the State Health Department upon request).
 - b. Have the certificate typed or legibly written in dark unfading ink, from the data the mother has supplied on the facsimile, (it is desirable to have one permanent employee prepare all certificates).
 - c. Upon completion, attach the birth certificate to the mother's hospital record so that the attending physician can sign it on his regular hospital round so it may be transmitted at the proper time.

Must file multiple births on separate certificates. Twins and multiple births must be reported on separate certificates.

Must file birth certificates within ten days. Within ten days after the event, the hospital shall file the birth certificate with the Local Registrar of the district in which the birth occurred. (Many hospitals follow the practical schedule of transmitting all certificates on a specific day each week.)

Procedure for registration of illegitimate births. A child born out of wedlock shall be recorded under the maiden name of the mother. No information will be shown regarding the father unless a notarized affidavit signed by the father admitting paternity of the child is submitted with the birth record.

NOTE: When paternity of a child has been established by court action the father's information can be added to the certificate upon submission of a certified copy of the court decree to the State Registrar.

A child born to a mother who is legally married is not considered illegitimate, since it is presumptive evidence that the husband is the father of the child and

should be recorded as such unless paternity has been otherwise established through court action.

Legitimation procedure. By subsequent marriage of the parents of an illegitimate child the birth becomes legitimate.

NOTE: Upon submission to the State Registrar of a certified copy of the marriage certificate and notarized statement signed by the father admitting paternity of the child, the birth certificate will be completed as a legitimate birth.

Suggested procedure for obtaining social security number. Procurement of the social security number is often very time consuming and difficult. In many instances the mother telephones the hospital prior to confinement relative to her clothing and other needs. In such cases she could be informed of the necessity for bringing the social security number with her when she enters the hospital.

Show identical data on certificate of hospital record as on birth certificate. Hospitals that issue certificates of the hospital record should ascertain that the information contained therein is the same correct data entered on the birth certificate, and should explain to the mother the difference between the certification of hospital record and the live birth certificate.

Inform mother regarding birth registration notification and certified copy. The hospital may inform the mother that she will receive a copy of notification of birth registration from the State Health Department within 90 to 120 days.

The mother may also be informed that she can secure, upon request for fifty cents, a certified photostat copy of the certificate from the State Health Department at any time after approximately thirty days.

Inform mother of short form certification for illegitimates. The mother of an illegitimate child may be informed she will not receive the notification of birth but will receive a short form certification of the record on file which will not include parentage or legitimacy. She may have the signature and seal of the State Department of Health affixed to this short form upon request at a fee of fifty cents.

Supplies. The hospital shall secure the supply of certificate books and envelopes from the Local or County Registrar.

UNDERTAKERS

Should be familiar with 1944 State of Iowa Circular of Information. Every embalmer, undertaker, funeral director or other person who handles funerals or other disposition of dead bodies should be thoroughly familiar with the 1944 State of Iowa Circular of Information containing the Laws and Rules and Regulations pertaining to The Practice of Embalming. This circular may be obtained by writing to the State Department of Health.

NOTE: This section of this manual describes only the responsibilities and mechanics for filing stillbirth and death certificates.

Responsible for filing death and stillbirth certificates. Iowa Law places the responsibility for the proper execution of a death or stillbirth certificate upon the undertaker or other person in charge of the funeral or disposition of the body.

Must complete certificates legibly. All certificates shall be typewritten or legibly written in dark unfading ink.

Completion of certificates. Detailed instructions for completion of death and stillbirth certificates are given with illustrations in another section of this manual.

Must file certificates within three days. The undertaker or person in charge of interment must file the death or stillbirth certificate within three days of occurrence with the Local Registrar of the district in which the death or stillbirth occurred. (Deviation in procedure when burial occurs in county other than county of death described below.)

Secures personal data. The personal data required for completing the certificate shall be obtained by the undertaker from the persons best qualified to supply them.

Secures medical certification. The undertaker shall present the certificate of death or stillbirth to the physician last in attendance upon the deceased, or to the coroner, who shall certify the cause of death.

Procures burial permit when death and burial occur in same registration district. The properly executed and completed death or stillbirth certificate shall be presented by the undertaker to the Local Registrar of the registration district in which the death or stillbirth occurred, who shall issue a burial permit. Such burial permit shall be secured within seventy-two hours after death, (3 days), and no burial or other disposition of a body shall be made until such burial permit has been secured.

Secures Burial Permit and Notice of Removal form when burial takes place in registration district other than death or stillbirth. When a death or stillbirth occurs in one registration district and the body is to be moved into another registration district within the state for burial, the burial permit should be secured from the Local Registrar of the registration district in which the death or stillbirth occurred, if possible. In cases where it is impossible to secure a death certificate or burial permit without delay, the funeral director shall:

- (1) Prepare "Notice of removal" form in triplicate.
- (2) Send the original copy of such form to the State Registrar.
- (3) Leave or mail the second copy of such form to the Local Registrar of the registration district in which the death occurred and from which the body is being moved.
- (4) Retain the third copy for use in securing the courtesy burial permit from the Local Registrar in the registration district in which the burial is to take place. (See note following item 2 of section 2318 of the vital statistics law pertaining to disposal of dead bodies.)
- (5) In instances where the body is removed from a hospital or institution

which requests some form of receipt for the removal of the body, an extra copy of the "Notice of removal" form should be completed for their files.

- (6) Forward the original death certificate to the Local Registrar of the registration district in which death occurred and from which the body was removed.

NOTE: In instances where the funeral director does not know who is local registrar of the district of occurrence he shall send the second copy of the "Notice of removal" form and subsequently the original death certificate to the County Registrar of the county where the death occurred.

This alternate procedure is approved as a matter of convenience for the duration of the war.

Burial-Transit permit. The new Burial-Transit permit replaces the "Burial, Removal or Cremation permit and the Transportation of Corpse" forms previously used. The burial-transit permit is used for burial or transportation of the dead.

Delivers burial permit to sexton of cemetery. The burial or disinterment permit shall be delivered by the undertaker to the sexton or other person in charge of the cemetery before interring, or disinterring any body therein. This is necessary in order to enable the sexton to indorse and transmit the permit to the Local Registrar of the district in which the cemetery is located.

If the cemetery has no sexton, the undertaker should sign the permit, indicate the date of burial and write on the face of the permit the words "no person in charge" and file, within ten days, with the Local Registrar of the district in which the cemetery is located.

Suggested fee for courtesy burial permit. Since Local Registrars do not receive a fee for handling death certificates and issuing burial permits on deaths occurring outside their district, it is suggested that the funeral director pay the Local Registrar twenty-five cents for each courtesy burial permit obtained.

LIVE BIRTH CERTIFICATE

(Detailed item instructions for preparation)
See model certificate and special examples

1. **Place of Birth:** The geographic information on the exact place of occurrence of birth. (See examples on page 21.)

- (a) **County.** Enter the name of the county in which birth occurred in full.
- (b) **Township.** Enter the name of the township.
- (c) **City or Town.** Enter the name of the city or town, regardless of size.
- (d) **Name of hospital or institution.** If the birth is known to have occurred in a hospital or an institution, enter the name of the hospital or institution, in full.

If the birth did not occur in a hospital or institution, enter the street number or other location at which the birth occurred.

If the birth occurred in a maternity or nursing home, enter the name and indicate whether a maternity or nursing home.

If the hospital or institution is outside the corporate limits of a city or town, write "rural" after the name of the hospital or institution.

- (e) **Length of Mother's stay BEFORE delivery.** This refers to the length of stay by the mother, prior to delivery, at the place where birth occurred and not to the length of stay at her usual residence.

In hospital or institution. Enter the number of days, months or years of mother's stay in the hospital or institution before the delivery. If less than one day indicate the number of hours or show as one (1) day.

In this community. Enter the number of hours, days, weeks, months or years of mother's stay within the city limits of the city or town where birth occurred.

Length of stay in this community refers to the city or town where the birth occurred, and not to the length of stay at mother's usual residence.

If the birth did not occur in a city or town, the length of stay in the county where the birth occurred shall be entered.

2. **Usual residence of mother.** The geographic data for the actual place of residence of the mother. (See examples on page 21.)

- (a) **State.** Enter the name of the state of residence of the mother.
- (b) **County.** Enter the name of the county, in full.
- (c) **City or town.** Enter the name of the city or town, regardless of size.
- (d) **Street address.** Enter the street address of the mother's residence. If rural, give location, such as: "10 miles west."

Do not write "same," even though the place of occurrence and usual residence are the same.

3. **Full name of child.** Print the full name, giving the first name first, then the middle name and then the surname last.

If the answer to item 8 is "yes," the child's surname shall be the husband's surname.

If the mother is unmarried and the father has not signed a certificate of consent admitting paternity, the child's surname shall be that of the mother's maiden name.

If the answer to item 8 is "divorced," the child's surname shall be the mother's

CERTIFICATE OF LIVE BIRTH

(Model)

| DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS | | IOWA STATE DEPARTMENT OF HEALTH DIVISION OF VITAL STATISTICS CERTIFICATE OF BIRTH | | STATE OFFICE NUMBER |
|--|--|--|--|---------------------|
| 1. PLACE OF BIRTH | | 2. USUAL RESIDENCE OF MOTHER | | |
| (a) County: <u>Story</u> | | (a) State: <u>Iowa</u> | | |
| (b) Township: <u>Washington</u> | | (b) County: <u>Story</u> | | |
| (c) City or town: <u>Ames</u> (If outside city or town limits, write RURAL and give town) | | (c) City or town: <u>Ames</u> (If outside city or town limits, write RURAL and give town) | | |
| (d) Name of hospital or institution: <u>Mary Greeley Hospital</u> (If NOT in hospital or institution give street number or location) | | (d) Street address: <u>2510 Hull Avenue</u> (If RURAL give LOCATION) | | |
| (e) Length of mother's stay before delivery: In hospital or institution: <u>1 day</u> In this community: <u>6 yrs.</u> (Specify number of years, months or days) | | | | |
| PRINT | | | | |
| 3. Full name of child: <u>James Riley Smith</u> | | | | |
| 4(a). Date of birth: <u>June 15, 1944</u> (Month, write out) (Day) | | | | |
| 5. Sex: <u>Male</u> | | | | |
| 6. Twin or triplet: <u>No</u> | | | | |
| 7. Number of mos. of pregnancy: <u>9</u> | | | | |
| 8. Is mother married: <u>Yes</u> (Yes, No) | | | | |
| 4(b). Hour of birth: <u>5:12</u> P.M. | | | | |
| FATHER OF CHILD | | MOTHER OF CHILD | | |
| 9. Full Name: <u>William Frederick Smith</u> | | 15. Full Maiden Name: <u>Ruth Ann Jonas</u> | | |
| 10. Color or Race: <u>White</u> | | 16. Color or Race: <u>White</u> | | |
| 11. Age at time of this birth: <u>32</u> years | | 17. Age at time of this birth: <u>30</u> years | | |
| 12. Birthplace: <u>Chicago, Illinois</u> (City, town, or county) (State or foreign country) | | 18. Birthplace: <u>Iowa City, Iowa</u> (City, town, or county) (State or foreign country) | | |
| 13. Usual occupation: <u>Professor (Nav. U.S. Army)</u> | | 19. Usual occupation: <u>Housewife</u> | | |
| 14. Industry or business: <u>Iowa State College</u> | | 20. Industry or business: <u>Own home</u> | | |
| Social Security No.: <u>Nona</u> | | Social Security No.: <u>Nona</u> | | |
| 21. Total OTHER children born to this mother (NOT including this one) <u>7</u> | | | | |
| (a) How many OTHER children of this mother now living? <u>1</u> | | | | |
| (b) How many OTHER children of this mother were born alive but are now dead? <u>0</u> | | | | |
| (c) How many children were born dead? <u>0</u> | | | | |
| 22. Mother's name and address for mailing registration notice: <u>Mrs. William F. Smith</u> <u>2510 Hull Avenue</u> <u>Ames, Iowa</u> | | | | |
| 23. I hereby certify to the birth of this child, who was born alive on the date stated above. The information given above was furnished by <u>Mrs. William F. Smith</u> , related to this child as <u>Mother</u> . | | | | |
| 24. Date received by local registrar: <u>June 20, 1944</u> | | | | |
| 25. Registrar's own signature: <u>Henry A. Smith</u> | | | | |
| 26. File No. <u>234</u> Given name added: <u>19</u> By: <u>Ames, Iowa</u> | | | | |
| THE FOLLOWING QUESTIONS ARE TO BE ANSWERED | | | | |
| 27. (a) Was blood test taken? <u>Yes</u> (b) Date taken: <u>Nov 1, 1943</u> | | | | |
| (c) By whom taken: <u>Dr. John W. Anderson</u> | | | | |
| 28. (a) Spontaneous? <u>Yes</u> (b) Operative? <u>No</u> (c) If operative give type of operation performed: <u>No</u> | | | | |
| 29. Was child asphyxiated? Slightly: <u>X</u> Moderately: <u>No</u> Severely: <u>No</u> | | | | |
| 30. In what month of pregnancy was mother first examined: <u>2nd</u> | | | | |
| 31. Congenital malformation? <u>No</u> Describe: <u>No</u> (Yes or No) | | | | |
| Birth Injury? <u>No</u> Describe: <u>No</u> (Yes or No) | | | | |
| 34. Were eyes treated as prescribed by law? <u>Yes</u> (Yes or No) | | | | |

legal (married) name unless her maiden name was restored to her by order of court. This applies only when paternity of the child has not been established and the divorce occurred more than nine months prior to the birth of the child. If such paternity has been established, the child's name shall be the father's surname.

4. Date of Birth. Enter the exact month, day, and year.

The following abbreviations may be used to designate the month: Jan., Feb., Mar., Apr., Aug., Sept., Oct., Nov., Dec. Write out May, June and July.

Do not use numbers to signify months.

Hour of birth. Enter the hour of birth, being sure to indicate A. M. or P. M.

5. Sex. Write "male" or "female."

6. (a) Twin or triplet. If a plural birth, write "twin" or "triplet." Prepare a separate certificate for each child. If not a plural birth, put a dash (—) in the space.

(b) If so: born 1st, 2nd or 3rd. Answer this item only on certificates for plural births. It is intended to show which of a pair of twins was born first. (See examples on page 22.)

If not a plural birth, put a dash (—) in the space.

7. Number of months of pregnancy. Enter the number of months of pregnancy of mother at time of birth.

Do not write the name of the month.

8. Is mother married. Write "yes" or "no."

Do not cross out the printed "yes" or "no" on the certificate.

If a divorce has occurred, write "divorced" and indicate the date and place of divorce on the reverse side of the certificate.

If the husband died within the nine-month period immediately preceding the birth, write "widowed."

If the husband died prior to the nine-month period immediately preceding the birth, the answer to this item is "no."

FATHER OF CHILD. If the answer to item 8 is "yes," the legal husband's name and other particulars shall be entered, since it is presumptive evidence that the husband is the father of the child. Only court action can change this procedure.

If the answer to item 8 is "no," the father's name and other particulars shall not be entered; (items 9-14 being left blank in such cases), unless the father admits paternity and a certificate of consent by the father accompanies the certificate, or paternity is established by the court, in which case a copy of the court order should be submitted.

If a divorce has occurred, item 8 should indicate this fact and the husband's name shall be entered as the father of the child if the divorce occurred within the nine months period immediately preceding the birth, unless court action has been taken to establish paternity of the child, in which case a copy of the court order should be submitted. If the divorce occurred more than nine months prior to the birth of the child, the information regarding the father should be omitted unless paternity is admitted or established through the courts.

If the answer to item 8 is "widowed," the father's name and other particulars

shall be entered in items 9 to 14. In addition, write diagonally through these items the word "Deceased" and directly below it, the date of death.

9. Full name. Write the full name, giving the first name first, then the middle name and surname.

10. Color or Race. Write "White," "Negro," "Indian," "Chinese," "Japanese," or if any other, write in full.

11. Age. Enter father's age as of time of birth of this child, in years only.

12. Birthplace. Enter in full, the city, town or county, also the state or foreign country.

13. Usual occupation. Give the usual occupation, as farmer, carpenter, or salesman.

For fathers in the military service only during war time, enter the usual pre-war occupation and then add ('now in U. S. Army') or whatever the service may be.

14. Industry or business. Be specific in giving the industry or business as related to the occupation shown in item 13.

Examples to Follow for Items 13 and 14

| Usual occupation | Industry or business |
|----------------------------|----------------------|
| Farmer | Own farm |
| Auto mechanic | Garage |
| Salesman (now U. S. Army) | Radio Appliance Co. |
| Inspector (now U. S. Navy) | Telephone Co. |

Social security number. Give number, or write "none."

If the number cannot be located, write "number unknown."

MOTHER OF CHILD.

15. Full maiden name. Write the first name, middle name and mother's maiden name.

16, 17, 18, 19 and 20. Same instructions as on items 10 to 14.

21. Total other children. In completion of this portion of the certificate, include all children born alive and dead to this mother, except the one for which the certificate is being made. (See examples on page 22.)

Total other children born to this mother. Specify the number of children, not including this one, for which the certificate is being prepared.

(a) Other children now living. Specify the number of children, not including this one, born alive to this mother who are now living.

(b) Number born alive now dead. Specify the number of children, not including this one, born alive to this mother who are now dead.

(c) Number born dead. Specify the number of pregnancies terminating in stillbirths.

Do not count miscarriages (less than 5 months gestation) in the number of children born item.

22. Mother's name and address. Enter name and address at which mother desires to receive the notification of registration which the State Health Department will send her.

23. Information furnished by, etc. The attending physician, midwife or other attendant shall:

- Indicate who furnished the personal particulars information.
- Show the relationship to the child.
- Affix own signature and indicate whether M. D., D. O., midwife or other.
- Indicate date signature affixed, and address.

24. Date received by Local Registrar. Local Registrar shall enter the actual date of receipt of the certificate.

25. Registrar's own signature. Actual signature of the Local Registrar.

26. File number. Indicate file number.

Given name added, by: If the given name is added after the certificate is received, enter the date added, and initials of person making entry.

27. Was blood test taken. Enter "yes" or "no."

(b) Date taken. Enter month, day and year.

(c) By whom taken. Enter name of physician who took blood test.

28. Spontaneous. Enter "yes" if spontaneous.

(b) Operative. Enter "yes" if operation performed.

(c) Type of operation. Enter type of operation performed, if any.

29. Was child asphyxiated. If so, "X" the appropriate space.

30. Month of pregnancy first examined. Indicate 1st, 2nd, 3rd, etc., month in which mother was first examined.

Do not indicate the date of the examination.

31. Congenital malformation. Write "yes" or "no," and describe if "yes."

Birth injury. Write "yes" or "no," and describe if "yes."

34. Eye treatment. Write "yes" or "no."

PLACE OF BIRTH AND USUAL RESIDENCE

(Examples)

Correct completion of items of certificate when:

Birth occurred at mother's usual home residence.

| | |
|--|---|
| 1. PLACE OF BIRTH | 2. USUAL RESIDENCE OF MOTHER |
| (a) County..... <u>Ida</u> | (a) State: <u>Iowa</u> |
| (b) Township..... <u>Maple</u> | (b) County: <u>Ida</u> |
| (c) City or town..... <u>Battle Creek, rural</u> | (c) City or town: <u>Battle Creek, rural</u> |
| (If outside city or town limits, write RURAL and give town) | (If outside city or town limits, write RURAL and give town) |
| (d) Name of hospital or institution..... | (d) Street address: <u>10 mi. west</u> |
| (If NOT in hospital or institution give street number or location) | (If RURAL give LOCATION) |
| (e) Length of mother's stay before delivery:..... | |
| In hospital or institution..... | In this community..... <u>5 years</u> |
| (Specify number of years, months or days) | |

Mother leaves usual residence and goes to city or town hospital immediately prior to delivery of child.

| | |
|--|---|
| 1. PLACE OF BIRTH | 2. USUAL RESIDENCE OF MOTHER |
| (a) County..... <u>Delaware</u> | (a) State: <u>Iowa</u> |
| (b) Township..... <u>Delaware</u> | (b) County: <u>Delaware</u> |
| (c) City or town..... <u>Manchester</u> | (c) City or town: <u>Manchester</u> |
| (If outside city or town limits, write RURAL and give town) | (If outside city or town limits, write RURAL and give town) |
| (d) Name of hospital or institution..... | (d) Street address: <u>Rural Route #2</u> |
| (If NOT in hospital or institution give street number or location) | (If RURAL give LOCATION) |
| (e) Length of mother's stay before delivery:..... | |
| In hospital or institution..... <u>1 day</u> | In this community..... <u>1 day</u> |
| (Specify number of years, months or days) | |

Mother leaves usual residence and goes to city or town one week prior to delivery of child, and then goes to the hospital of that city or town immediately before delivery.

| | |
|--|---|
| 1. PLACE OF BIRTH | 2. USUAL RESIDENCE OF MOTHER |
| (a) County..... <u>Sioux</u> | (a) State: <u>South Dakota</u> |
| (b) Township..... <u>Buncombe</u> | (b) County: <u>Lincoln</u> |
| (c) City or town..... <u>Hawarden</u> | (c) City or town: <u>Hudson, rural</u> |
| (If outside city or town limits, write RURAL and give town) | (If outside city or town limits, write RURAL and give town) |
| (d) Name of hospital or institution..... | (d) Street address: <u>Rural Route #2</u> |
| (If NOT in hospital or institution give street number or location) | (If RURAL give LOCATION) |
| (e) Length of mother's stay before delivery:..... | |
| In hospital or institution..... <u>6 hrs.</u> | In this community..... <u>1 week</u> |
| (Specify number of years, months or days) | |

Birth occurred at hospital located outside corporate limits of city or town, such hospital being in same county as mother's usual residence. (Note that in such case the length of stay in community of hospital is the length of stay in usual residence).

| | |
|--|---|
| 1. PLACE OF BIRTH | 2. USUAL RESIDENCE OF MOTHER |
| (a) County..... <u>Poweshiek</u> | (a) State: <u>Iowa</u> |
| (b) Township..... <u>Grant</u> | (b) County: <u>Poweshiek</u> |
| (c) City or town..... <u>Grinnell, rural</u> | (c) City or town: <u>Grinnell, rural</u> |
| (If outside city or town limits, write RURAL and give town) | (If outside city or town limits, write RURAL and give town) |
| (d) Name of hospital or institution..... | (d) Street address: <u>R.F.D. #5</u> |
| (If NOT in hospital or institution give street number or location) | (If RURAL give LOCATION) |
| (e) Length of mother's stay before delivery:..... | |
| In hospital or institution..... <u>1 day</u> | In this community..... <u>5 yrs.</u> |
| (Specify number of years, months or days) | |

NUMBER OF OTHER CHILDREN BORN TO THIS MOTHER ITEM

(Examples)

Correct completion of items when the certificate being prepared is for the:

First child born to this mother

Second child born to this mother

21. Total OTHER children born to this mother (NOT including this one) 1.0
(a) How many OTHER children of this mother now living? 0
(b) How many OTHER children of this mother were born alive but are now dead? 0
(c) How many children were born dead? 0

21. Total OTHER children born to this mother (NOT including this one) 1.1
(a) How many OTHER children of this mother now living? 1
(b) How many OTHER children of this mother were born alive but are now dead? 0
(c) How many children were born dead? 0

Third child born to this mother

Fourth child born to this mother

21. Total OTHER children born to this mother (NOT including this one) 2.2
(a) How many OTHER children of this mother now living? 2
(b) How many OTHER children of this mother were born alive but are now dead? 0
(c) How many children were born dead? 0

21. Total OTHER children born to this mother (NOT including this one) 2.3
(a) How many OTHER children of this mother now living? 1
(b) How many OTHER children of this mother were born alive but are now dead? 1
(c) How many children were born dead? 1

First child in set of twins with two previous births to mother

Second child of same set of twins

5. Sex Male 6a. Twin or triplet 1st 6b. If so: born 1st 1st 7. Number of 1st of pregnancy
FATHER OF CHILD

9. Full Name James Howard Blockton
10. Color or Race White 11. Age at time of this birth 37 years
12. Birthplace Decorah, Winneshiek Co., Iowa (City, town, or county) (State or foreign country)
13. Usual occupation Dentist
14. Industry or business Own Office
Social Security No. 17195

21. Total OTHER children born to this mother (NOT including this one) 2.2
(a) How many OTHER children of this mother now living? 2
(b) How many OTHER children of this mother were born alive but are now dead? 0
(c) How many children were born dead? 0

5. Sex Male 6a. Twin or triplet 2nd 6b. If so: born 1st 2nd 7. Number of 2nd of pregnancy
FATHER OF CHILD

9. Full Name James Howard Blockton
10. Color or Race White 11. Age at time of this birth 37 years
12. Birthplace Decorah, Winneshiek Co., Iowa (City, town, or county) (State or foreign country)
13. Usual occupation Dentist
14. Industry or business Own Office
Social Security No. 17195

21. Total OTHER children born to this mother (NOT including this one) 2.3
(a) How many OTHER children of this mother now living? 1
(b) How many OTHER children of this mother were born alive but are now dead? 1
(c) How many children were born dead? 1

CERTIFICATE OF DEATH

(Model)

| DEPARTMENT OF COMMERCE Bureau of the Census | | IOWA STATE DEPARTMENT OF HEALTH Division of Vital Statistics | | State Office No. |
|---|--|---|--|------------------|
| 1. PLACE OF DEATH: | | 2. USUAL RESIDENCE (HOME) OF DECEASED: | | |
| (a) County <u>Jasper</u> Township <u>Newton</u> | | (a) State <u>Iowa</u> (b) County <u>Jasper</u> | | |
| (b) City or Town <u>Newton</u> (If outside city or town write RURAL NEAR and give town) | | (c) City or town <u>Newton</u> (If outside city or town write RURAL NEAR and give town) | | |
| (c) Hospital or Institution: Name and Street Address <u>Skiff Hospital</u> | | (d) Street No. <u>700 W. Second Street So.</u> (If rural give LOCATION) | | |
| Length of stay: | | (e) If foreign born how long in U.S.A. <u>19.44</u> years | | |
| In hospital or institution <u>12</u> yrs. <u>5</u> mos. <u>1</u> day | | (f) Citizen of foreign country? <u>No</u> (yes or no) | | |
| In this community <u>12</u> yrs. <u>5</u> mos. <u>1</u> day | | (g) If yes, name of country <u>World War I</u> | | |
| 3. (a) FULL NAME <u>James Howard Blockton</u> | | 3. (b) IF VETERAN, NAME WAR <u>World War I</u> | | |
| 4. Sex <u>Male</u> 5. Color or Race <u>White</u> 6. (a) Single, married, widowed or divorced <u>Married</u> | | 20. DATE OF DEATH <u>July 5</u> 19 <u>44</u> , at <u>10 P.M.</u> (Month, WRITE OUT) (Day) (Time) | | |
| 6. (b) Name of husband or wife <u>Ellen H.</u> | | 21. I CERTIFY that death occurred on the date above stated; that I attended deceased from <u>July 4</u> 19 <u>44</u> to <u>July 5</u> 19 <u>44</u> , and that I saw him <u>alive on July 5</u> 19 <u>44</u> | | |
| 7. Birth date of deceased (mo., day, yr.) <u>June 1, 1901</u> | | Immediate cause of death <u>Punctured lung</u> | | |
| 8. Age <u>43</u> Years <u>1</u> Months <u>2</u> Days <u>hrs.</u> <u>min.</u> | | <u>Crushed chest</u> | | |
| 9. Birthplace <u>Decorah, Winneshiek Co., Iowa</u> (Town, county and state or foreign country) | | <u>Fractured femur</u> | | |
| 10. Usual occupation <u>Dentist</u> | | <u>Internal injuries</u> | | |
| 11. Industry or business <u>Own Office</u> | | Due to <u>Internal injuries</u> | | |
| 12. Name <u>George John Blockton</u> | | Other conditions <u>None</u> | | |
| 13. Birthplace <u>Salem, Massachusetts</u> (City, town or country) (State or foreign country) | | (Include pregnancy within 3 months of death) | | |
| 14. Name <u>Myrtle Ellen Prugh</u> | | OPERATION: Date of <u>None</u> | | |
| 15. Birthplace <u>Atlanta, Georgia</u> (City, town or country) (State or foreign country) | | Of operation <u>None</u> | | |
| 16. (a) Informant's own signature <u>Mrs. Ellen J. Blockton</u> | | Of autopsy <u>None</u> | | |
| (b) Address <u>Newton, Iowa</u> | | PHYSICIAN Please underline the cause to which the death should be ascribed | | |
| 17. (a) Burial, cremation, or removal (specify) <u>Burial</u> (Month) (Day) (Year) <u>July 8, 1944</u> | | 22. If external causes contributed to the death, fill in the following: | | |
| (b) Place of burial or cremation <u>Green Acres Cemetery</u> | | (a) <u>accident</u> (b) Date of <u>July 4, 1944</u> | | |
| Location <u>Newton, Iowa</u> | | (c) Where did injury occur? <u>Rural</u> <u>Linn</u> <u>Iowa</u> | | |
| 18. (a) Signature <u>Ellen J. Blockton</u> | | (d) Injured at home, farm, industry, public place (where)? <u>Public highway</u> | | |
| (b) Address <u>Newton, Iowa</u> (c) License No. <u>17195</u> | | (e) Injured at work? (Yes or no) <u>No</u> | | |
| 19. Signature <u>Margaret Vick</u> District <u>50-7</u> | | (f) Means of injury <u>Auto & train accident</u> | | |
| Date received <u>July 5, 1944</u> Filed No. <u>201</u> | | (g) Nature of injury <u>Multiple injuries</u> | | |
| (OVER) | | 23. (a) Signature <u>H. J. Denismore, M.D.</u> (b) Address <u>Newton, Iowa</u> (c) Date signed <u>July 5, 1944</u> | | |
| SOCIAL SECURITY ACCOUNT No. <u>none</u> | | | | |

DEATH CERTIFICATE

(Detailed item instructions for preparation)

See model certificate

1. **Place of death.** The geographic information on the exact place of occurrence of death. (See examples cited for completing item 1 of birth certificate on page 21.)

(a) **County.** Enter in full the name of the county in which the death occurred.
Township. Enter the name of the township.

(b) **City or town.** Enter the name of the city or town, regardless of size.
If the death is known to have occurred outside the corporate limits of the city or town, enter "rural" after the name of the city or town.

(c) **Hospital or institution.** If the death occurred in a hospital or an institution, enter the name of the hospital or institution.

Do not enter the street address of the hospital or institution.

If the death did not occur in a hospital or institution, indicate place of occurrence, such as residence or hotel.

If the hospital or institution is outside the corporate limits of a city or town, write "rural" after the name of the hospital or institution.

Length of stay. This refers to the length of stay of the decedent at the place where death occurred and not the length of stay at the usual residence.

In hospital or institution. Enter the number of years, months or days of the decedent's stay in the hospital or institution where death occurred.

In this community. Enter the number of years, months or days of the decedent's stay in the city or town where death occurred.

If the death did not occur in a city or town, the length of stay in the county where death occurred shall be entered.

2. **Usual residence (home) of deceased.** For newborn infant give residence of mother. (See examples cited for completing item 2 of birth certificate on page 21.)

(a) **State.** Enter the name of the State of residence of the decedent.

(b) **County.** Enter the name of the county.

(c) **City or town.** Enter the name of the city or town, regardless of size.

(d) **Street number.** Enter the street address of the decedent's residence.

(e) **If foreign born, how long in U. S. A.** Enter the number of years of residence in the U. S. A. if the decedent was foreign.

(f) **Citizen of foreign country.** Enter "yes" or "no."

If "yes," name of country. Enter name of such foreign country.

NOTE: (Use place of birth and usual residence examples.)

3. (a) **Full name.** Print the full name, giving the first name first, then the middle name and then the surname last. In case of married women, enter Mary Lois Martin instead of Mrs. John Martin.

(b) **If veteran, name war.** If deceased was a veteran of any war, enter the name of that war.

If not a veteran, enter "none."

4. **Sex.** Write "male" or "female."

5. **Color or Race.** Write "White," "Negro," "Indian," "Chinese," "Japanese," or if any other, write in full.

6. **Single, married, widowed or divorced.** Enter marital status of deceased at time of death.

If decedent was an infant or child, write "single."

(b) **Name of husband or wife.** Enter full name of husband or wife of decedent, if any.

(c) **If alive give age.** Enter age in years of the husband or wife of the decedent, if alive.

7. **Birth date of deceased.** Enter month, day and year on which deceased was born.

8. **Age.** Enter the age of deceased in years, months and days and in hours and minutes if deceased was an infant.

If exact age is not known, estimate the age and write "approximately.....years."

9. **Birthplace.** Enter the name of the town or county and state in which deceased was born. If the deceased's birthplace was a foreign country, enter the name of the country in which he was born.

10. **Usual occupation.** Give the usual occupation, as housewife, stenographer, farmer.

For decedent in wartime military service, enter the usual pre-war occupation and add "now in U. S. Army" or whatever the service may be.

In such cases, the name of the decedent's military camp or station and his serial number should be indicated in the upper left hand corner of the death certificate.

11. **Industry or business.** Be specific in giving the industry or business as related to the occupation shown in item 10.

12. **Father's name.** Enter the full name of the father of the deceased.

13. **Father's birthplace.** Enter the city, town or county, and state or foreign country of the birthplace of the father of the decedent.

14. **Mother's name.** Enter the full maiden name of the mother of the deceased.

15. **Mother's birthplace.** Enter the city, town or county and state or foreign country of the birthplace of the mother of the decedent.

16. **Informant's own signature.** The person who provides the information in items 1 through 15 should personally sign the certificate of death in this space.

(b) **Address.** Enter address of informant.

17. **Method of disposal.** Specify whether burial, cremation, or removal.

(b) **Date.** Enter month, day and year. (This also applies to removal.)

(c) **Place.** Indicate address of burial or cremation.

Location. Indicate location.

18. **Funeral Director.** Certificate must be signed by the funeral director or person in charge of interment.

(b) **Address.** Enter address of funeral director.

(c) **License No.** Enter license number of funeral director.

19. **Signature.** Local Registrar's personal signature.

District. Enter district number.

Date received. Enter date certificate received by Local Registrar.

File No. Enter Local Registrar's file number.

Social security number. If deceased had a social security number, enter that number. If not, enter "none." If the number cannot be located, write "number unknown."

Medical certification. This portion of the death certificate shall be completed by the attending physician, or in the absence of such person, by the coroner.

20. Date of death. Write out the month, then enter the day and year and exact time of death.

Approximate date of death shall be determined and entered in cases where exact date of death is not known.

21. Certification.

Attended deceased. Enter the beginning and ending dates of attendance of deceased, as well as the last date on which deceased was attended.

Immediate cause of death. Enter disease or injury which caused death, not the symptoms.

Due to other conditions. See reverse side of death certificate for detailed instructions relative to completion of the cause of death, due to and other conditions.

Special care should be taken to indicate the years, months or days of duration of condition.

Operation. Be sure that the reason for the performances of the operation is included in the medical certification information.

Date. Enter the exact date if an operation or autopsy was performed.

Major findings of operation. Indicate findings of operation, if any.

If no operation was performed, write "none."

22. Contributory external causes. (Accident, suicide or homicide.) This item shall be completed in every instance in which external causes contributed to death.

(a) **Accident, suicide or homicide.** Write "accident," "suicide" or "homicide."

Do not simply cross out the printing of two of these items on the certificate.

(b) **Date of.** Enter the exact date of the accident, suicide or homicide.

(c) **Where did injury occur.** Enter the name of the city or town, and county and state in which the injury occurred.

If injury occurred outside the city limits of the city or town, write "rural," followed by the name of the county and state.

(d) **Place.** Indicate whether injury occurred at home, farm, industry, public place or other.

(e) **Injured at work.** Write "yes" or "no."

(f) **Means of injury.** Indicate how the injury occurred; whether a fall, machinery, auto accident or other.

(g) **Nature of injury.** Indicate kind of injury, such as fractured skull, broken leg, crushed ribs, punctured lung or other.

23. Signature. Actual signature of physician or coroner who completed the medical certification.

(b) **Address.** Enter name of town and state.

(c) **Date signed.** Enter the date on which the M. D., D. O., or Coroner signed the certificate.

STILLBIRTH CERTIFICATE

(Model)

| STANDARD CERTIFICATE OF STILLBIRTH | | IOWA STATE DEPARTMENT OF HEALTH Division of Vital Statistics DEPARTMENT OF COMMERCE Bureau of the Census | | State Office No. |
|--|--|---|--|---|
| 1. PLACE OF STILLBIRTH: (a) County <u>Cherokee</u> (b) Township <u>Cherokee</u> (c) City or town <u>Cherokee</u> (d) Name of hospital or institution: <u>Sioux Valley Hospital</u> (e) Mother's stay before delivery in hospital or institution <u>2</u> days | | 2. USUAL RESIDENCE OF MOTHER: (a) State <u>Iowa</u> (b) County <u>Cherokee</u> (c) City or town <u>Cherokee</u> (d) Street No. <u>610 Baldwin Street</u> | | |
| 3. Full name of child (PRINT) <u>Linda Marie Baker</u> | | 4. Date of birth <u>May 23 1944</u> | | |
| 5. Sex: <u>Female</u> | 6. Twin or triplet <u>---</u> If so—born 1st, 2d, or 3d <u>---</u> | 7. Number months of pregnancy <u>9</u> | | 8. Is mother married? <u>Yes</u> |
| 9. Full name <u>Robert Arthur Baker</u> | | 10. Full maiden name <u>Elizabeth Ann Miller</u> | | |
| 11. Color or race <u>White</u> | | 12. Age at time of this birth <u>30</u> yrs. | | |
| 13. Birthplace <u>Chicago</u> | | 14. Birthplace <u>Illinois</u> | | |
| 15. Usual occupation <u>Printer</u> | | 16. Usual occupation <u>Housewife</u> | | |
| 17. Industry or business <u>Home Gazette</u> | | 18. Industry or business <u>Own home</u> | | |
| 19. Children born to this mother (not including this one) <u>1</u> | | 20. How many children were born alive but now dead? <u>0</u> | | |
| (a) How many children of this mother are now living? <u>1</u> | | (c) How many OTHER children were born dead? <u>0</u> | | |
| 21. At what period of pregnancy was mother first examined? <u>Second month</u> | | 22. Was blood test taken? <u>Yes</u> | | |
| 23. By whom? <u>L. J. Hickett, M.D.</u> | | 24. Date taken <u>October 15, 1943</u> | | |
| 25. If not taken give reason <u>---</u> | | 26. Cause of stillbirth (state only morbid conditions causing fetal death. Do not use such terms as prematurity, asphyxia, etc.): (a) Fetal causes <u>Strangulation Short Cord</u> (b) Maternal causes <u>Syphilis</u> | | |
| 27. Did child die before labor? <u>no</u> During labor? <u>yes</u> | | 28. Pregnancy, complications of <u>none</u> | | |
| 29. Labor: (a) Complications of <u>Malposition of child</u> (b) Induced? <u>no</u> | | 30. (a) Was there an operation for delivery? <u>no</u> (b) State all operations, if any <u>none</u> | | |
| (c) Did child die before operation? <u>---</u> or during operation? <u>---</u> | | 31. I hereby certify that I attended the birth of this child who was born dead at the hour of <u>2:30 A.M.</u> on the date above stated. | | |
| 32. (a) Informant <u>Robert A. Baker</u> (b) Address <u>Cherokee, Iowa</u> | | 33. Signature <u>L. J. Hickett M.D.</u> Address <u>Cherokee, Iowa</u> | | |
| 34. (a) Burial, cremation, or removal <u>burial</u> (b) Date <u>May 24</u> | | 35. (a) Statement of coroner if physician was not present at stillbirth <u>---</u> | | |
| (c) Place of burial or cremation <u>Cherokee, Iowa</u> | | 36. Date filed with local registrar <u>May 23, 1944</u> | | |
| 35. Licensed Embalmer: <u>N. M. Blume</u> No. <u>18936</u> | | 37. Registrar's own signature <u>L. J. Hickett</u> Filed <u>May 23</u> 1944 No. <u>18-11</u> | | |

WRITE IN INK OR TYPE ADDITIONAL INFORMATION ON REVERSE SIDE

STILLBIRTH CERTIFICATE

(Detailed item instructions for preparation)

See model certificate

1. Place of Stillbirth. The geographic information on the exact place of occurrence of stillbirth. (See examples cited for completing item 1 of birth certificate on page 21.)

(a) **County.** Enter the name of the county in which the stillbirth occurred.

(b) **Township.** Enter the name of the township.

(c) **City or Town.** Enter the name of the city or town, regardless of size.

If the stillbirth occurred outside the corporate limits of the city or town, enter "rural" after the name of the city or town.

(d) **Name of hospital or institution.** If the stillbirth occurred in a hospital or institution, enter the street number or other location at which the stillbirth occurred.

If the stillbirth did not occur in a hospital or institution, enter the street number or other location at which the stillbirth occurred.

If the stillbirth occurred in a maternity or nursing home, enter the name and indicate whether a maternity or nursing home.

If the hospital or institution is outside the corporate limits of a city or town, write "rural" after the name of the hospital or institution.

(e) **Mother's stay before delivery in hospital or institution.** Enter the number of hours, days or weeks of mother's stay in the hospital or institution before the delivery.

This refers to the length of mother's stay, prior to delivery, at the place where the stillbirth occurred and not to the length of stay at her usual residence.

NOTE: (Use place of birth and usual residence examples.)

2. Through 21. Follow instructions for these same items on the regular live birth certificate.

22. Period of pregnancy mother first examined. Indicate 1st, 2nd, 3rd, etc., month in which mother was first examined.

Do not indicate the date of the examination.

23. Blood test taken. Write "yes" or "no."

24. By whom. Enter name of physician who took blood test.

25. Date taken. Enter month, day and year.

26. If not taken, give reason. Indicate the reason blood test was not taken.

27. Did child die before labor. Answer "yes" or "no."

During labor. Answer "yes" or "no."

28. Pregnancy complications. Give only specific pregnancy complications.

29. Labor: Complications. Give only specific complications of labor.

Induced. Answer "yes" or "no."

30. (a) Operation before delivery. Write "yes" or "no."

(b) **State all operations, if any.** Forceps, cesarean, episiotomy or version or other.

(c) **Death before operation or** Write "yes" or "no."

During operation. Write "yes" or "no."

31. Cause of Stillbirth—

(a) **Fetal causes.** Write only those specific causes which refer to fetus.

(b) **Maternal causes.** Write only those specific causes pertaining to mother.

32. Hour of Stillbirth. Enter exact hour stillbirth occurred.

Signature. Actual signature of physician, midwife or other person in attendance.

Address. Enter address.

33. (a) Informant. Actual signature of person who supplied the information for the personal particulars portion of the certificate.

(b) **Address.** Enter address of above informant.

34. (a) Disposal. Indicate whether burial, cremation or removal.

(b) **Date.** Enter month, day and year.

(c) **Place.** Indicate place of burial or cremation.

35. Licensed Embalmer. Personal signature of the licensed embalmer.

Number. Enter embalmer's license number.

36. (a) Coroner's statement. If the stillbirth was not attended by a physician the certificate shall bear a statement by the Coroner.

(b) **Signature.** Actual signature of Coroner.

37. Date received by Local Registrar. Enter exact date certificate was received.

38. Registrar's signature. Local Registrar's personal signature.

Filed. Enter date the certificate is numbered and entered in record book.

Number. Enter the file number as recorded in record book.

DEFINITIONS

(For the purpose of this Manual)

Commissioner. "Commissioner" means the commissioner of public health.

State Department. "State Department" or "Department" means the state department of health.

Health Officer. "Health Officer" means the physician who is the health officer of the local board of health.

Local Board. "Local Board" means the local board of health.

Laws. "Laws" means the pertinent portions of the 1939 Code with amendments as made by the 49th General Assembly.

Rules. "Rules" include regulations and orders by the State Registrar and/or the State Director.

Vital Statistics. "Vital Statistics" means statistics concerning births, deaths, stillbirths, marriages and divorces.

State Registrar. "State Registrar" means the State Registrar of vital statistics. By law the commissioner of public health shall be the State Registrar.

State Director. "State Director" means the person in charge of the division of vital statistics.

Registration District. "Registration District" means the definite district assigned to each Local Registrar by the County Registrar. Cities over 35,000 population are separate registration districts.

County Registrar. "County Registrar" means the County Registrar of vital statistics. By law the clerk of the district court is the County Registrar.

Deputy County Registrar. "Deputy County Registrar" means the deputy appointed by the County Registrar to act in his place in case of absence or disability.

Local Registrar. "Local Registrar" means the Local Registrar of vital statistics.

Local Deputy Registrar. "Local Deputy Registrar" means the deputy appointed by the Local Registrar to act in his place in case of absence or disability.

Sub-registrar. "Sub-registrar" means a funeral director appointed by the County Registrar for the purpose of permitting him to issue burial permits where it is inconvenient or unsatisfactory for the Local Registrar in such area to issue same.

Physician. "Physician" means a person legally authorized to practice medicine in this state.

Attendant. "Attendant" means the person in attendance at the time of a birth, death or stillbirth.

Dead Body. "Dead Body" means the lifeless human body or such parts of the human body or the bones thereof.

Sexton. "Sexton" means any person having charge of a public cemetery or graveyard.

Cemetery. "Cemetery" means any burial ground, either public or private.

Person in charge of interment. "Person in charge of interment" means any person who places or causes to be placed a stillborn child or dead body or the ashes, after cremation, in a grave, vault, urn or other receptacle, or otherwise disposes thereof.

Live Birth. "Live Birth" means the birth of a child who shows evidence of life after the child is entirely outside the mother.

Stillbirth. "Stillbirth" means a birth after 20 weeks of gestation which is not a live birth.

Delayed Certificate of Birth. "Delayed certificate of birth" means the birth certificate of a person born in this state but filed one year or more after the occurrence of the birth.

Community. The word "Community" as referred to on birth and death certificates is defined as the area within the limits of any city or town. If an event occurred outside the limits of any city or town, the community would be considered the entire county.

LAWS PERTAINING TO VITAL STATISTICS

(Numbered Sections refer to 1939 Code)

| | |
|---|--|
| 49th G. A. Ch. 117, Sec. 5 | 2418 Fee for reporting no registration |
| 49th G. A. Ch. 117, Sec. 7 | 2419 No fee for registering physician |
| 49th G. A. Ch. 117, Sec. 9 | 2420 Payment of local registrars |
| 2392 Removal of registrars | 2421 Record book of marriages and divorces |
| 2393 Duties of state registrar | 2422 Contents of record book for marriages |
| 2394 Duties of local registrar | 2423 Contents of record book for divorces |
| 49th G. A. Ch. 117, Sec. 13 | 2424 Source of entries for record book |
| 2396 Regulation | 2425 Reporting marriages and divorces |
| 2397 Birth certificate | 2426 Certified copies of records—fees |
| 2398 Contents of birth certificate | 2427 Search of records—fee |
| 2399 Person in attendance at birth | 2428 Free certified copies |
| 2400 Reporting birth. | 2429 United States census bureau |
| 2401 Certificate of birth | 2430 Accounting for fees |
| 2402 Incomplete certificates | 2431 Copies of record as evidence |
| 2403 Interrogation of informants | 2432 System exclusive |
| 2406 Altering certificates | 2433 Investigation |
| 2407 Records of personal particulars | 2434 Duty of county attorney |
| 2408 Source of information | 2435 Duty of attorney general |
| 2409 Time of making record | 2436 Penalty |
| 2410 Physicians—Undertakers, Casket dealers | 2437 Second offense |
| 2414 Duty to furnish information | |
| 2415 Private genealogical records | |
| 2416 Certified copies | |
| 2417 Fee | |

49th G. A. Ch. 117, Sec. 5. The clerk of the district court of each county shall be the county registrar.

49th G. A. Ch. 117, Sec. 7. Each county registrar shall appoint one of his deputy clerks of court as deputy county registrar and said deputy county registrar shall act in his place in case of his absence or disabilities; and such deputy shall, in writing, accept such appointment.

49th G. A. Ch. 117, Sec. 9. The county registrar shall with the approval of the board of supervisors, appoint as many local registrars as are, in his opinion, necessary to carry out the provisions of this chapter and shall assign to each local registrar a definite district, except that local registrars in cities having a population of thirty-five thousand (35,000) or more, shall be appointed by the local board of health. A copy of such appointments and assignments shall be kept as a permanent record in the office of the county registrar and a copy thereof shall be forwarded to the state registrar.

2392. **REMOVAL.** Any local registrar, who in the judgment of the state department fails or neglects to make prompt and complete return of births and deaths, and otherwise efficiently discharge the duties of his office, shall be forthwith removed by the department. (C24, 27, 31, 35, 2392.)

2393. **DUTIES OF STATE REGISTRAR.** The state registrar shall:

1. Have general supervision of the registration of vital statistics.

2. Have supervisory power over local registrars, deputy registrars, and sub-registrars, and clerks of the district court in the enforcement of the law relative to the disposal of dead bodies and the registration of vital statistics.

3. Prepare and issue such detailed instructions as may be required to procure the uniform observance of the provisions of said law and the maintenance of a perfect system of registration.

4. Furnish blank certificates of births, deaths, and other forms and record books required by this chapter to all persons concerned with the administration of the same. No other blanks and records shall be used than those supplied by the state registrar.

5. Carefully examine the certificates received from the local registrars and clerks of the district court, and if any such are incomplete or unsatisfactory he shall require such further information to be supplied as may be necessary to make the record complete and satisfactory.

2394. **DUTIES OF LOCAL REGISTRAR.** The local registrar shall, subject to the direction and supervision of the state registrar:

1. Strictly and thoroughly enforce the law relative to the disposal of dead bodies and the registration of births and deaths in his registration district.

2. Issue instructions to all physicians, undertakers and the people in general in his district, concerning the registration of births and deaths.

3. Distribute to the proper persons all forms and blanks required for the registration of births and deaths, and for the making of other records incident thereto.

4. Distribute to every physician, undertaker, and retail casket dealer registered in his district, a copy of the law relative to the registration of vital statistics and the disposal of dead bodies, and of the rules of the state department pertaining thereto.

5. Carefully examine each certificate of birth or death when presented for record, in order to ascertain whether it has been made out in accordance with law and the instructions of the state registrar; and if any such certificate is incomplete or unsatisfactory, he shall have the same corrected.

6. Number consecutively the certificates of birth and death, in two separate series, beginning with number one for the first birth and the first death in each calendar year, and sign his name as registrar in attestation of the date of filing in his office.

7. Make a complete and accurate copy of each birth and death certificate registered by him in a record book supplied by the state registrar, to be preserved permanently in his office as the local record.

8. On the third day of each month, transmit to the county registrar, in a stamped return envelope furnished by the state registrar, all original certificates registered by him for the preceding month. If no births or deaths occur in any month, he shall on the third day of the following month report that fact to the county registrar, on a card provided for such purpose.

9. Make an immediate report to the state registrar of any violation of the law relative to registration of vital statistics and the disposal of dead bodies of which he has knowledge.

49th G. A. Ch. 117, Sec. 13. On the tenth day of every month the county registrar shall transmit to the state registrar, in a stamped returned envelope furnished by the state registrar, the original certificates transmitted to him by the several local registrars after first making a permanent record thereof in a book to be approved by the state registrar. If no births or deaths occur within the county in any month, he shall on the tenth day of the following month report that fact to the state registrar on a card provided for that purpose.

2396. REGULATION. Every provision of this chapter, of the chapter relative to the disposal of dead bodies, and of the rules of the state department applicable to county registrars in the registration of births and deaths, and the issuance of burial permits, shall apply to deputy registrars and local registrars.

2397 BIRTH CERTIFICATE. Within ten days after each birth there shall be filed with the local registrar of the district in which the birth occurred a certificate of such birth filled out with durable black ink in a legible manner.

2398. CONTENTS OF BIRTH CERTIFICATE. The certificate of birth shall be executed on the United States standard form, approved by the bureau of the census.

NOTE: See item instructions for preparation of certificate.

2399. PERSON IN ATTENDANCE AT BIRTH. The attending physician, or person acting as midwife, shall be responsible for the proper execution and return of a certificate for each birth, in accordance with the provisions of this chapter.

2400. REPORTING BIRTH. In case there is no physician, or person acting as midwife, in attendance upon the birth, a report of the same shall be made within ten days thereafter to the local registrar of the district in which the birth occurred. It shall be the duty of the following persons, in the order named, to make such report:

1. The father or mother of the child.
2. The householder or owner of the premises where the birth occurred.
3. The manager or superintendent of the public or private institution in which the birth occurred.

2401. CERTIFICATE OF BIRTH. When the report of a birth is received under section 2400, the local registrar shall secure from the person so reporting, or from any other person having the required knowledge, such information as will enable him to prepare the proper certificate of birth.

2402. INCOMPLETE CERTIFICATES. No certificate of birth shall be held complete and correct that does not supply all of the items of information called for in the United States standard form certificate, detailed in accordance with the rules of the state department, or satisfactorily account for their omission. If a certificate of birth is incomplete, the local registrar shall immediately notify the informant and require him to supply the missing items of information if they can be obtained, or he may obtain them from any other person having the required knowledge.

2403. INTERROGATION OF INFORMANTS. Every person making a return of a birth or reporting the same, or who may be interrogated in relation thereto, shall answer correctly, and to the best of his knowledge, all questions put to him by the local registrar which may be calculated to elicit any information needed to make a complete record of the birth as provided in this chapter, and the informant, as to any statement made in accordance herewith, shall verify such statement by his signature, when requested to do so by the local registrar.

2406. ALTERING CERTIFICATES. No certificate of birth or death, after its acceptance for registration by the local registrar, and no other record made in pursuance of this chapter, shall be altered or changed in any respect except by amendments dated, signed, and witnessed.

2407. RECORDS OF PERSONAL PARTICULARS. Every superintendent in charge of any hospital, county home, jail, reformatory, penitentiary, or other institution, public or private, to which persons resort for treatment of diseases or for confinement, or are committed by process of law, shall keep a record, as

directed by the state registrar, of all the personal particulars and data relative to each patient, inmate, or prisoner in such institution which are required in the United States standard forms of birth and death certificates.

2408. SOURCE OF INFORMATION. The personal particulars and data required by section 2407, shall be obtained from the individual himself if practicable to do so; and when not, the same shall be obtained in as complete a manner as possible from relatives, friends, or other person acquainted with the facts.

2409. TIME OF MAKING RECORD. Such record shall be made for each patient, inmate, or prisoner at the time of his admittance; and in case of each person admitted or committed for treatment of disease, the physician in charge shall specify for entry in the record the nature of the disease, and where, in his opinion, it was contracted.

2410. PHYSICIANS—UNDERTAKERS—CASKET DEALERS. Every physician, undertaker, and retail casket dealer, shall, not later than the first day of January of each year, register his name, address, and occupation with the local registrar of the district in which he resides. Such registration shall also be made immediately upon removing to another registration district.

2414. DUTY TO FURNISH INFORMATION. Upon demand of the state registrar in person, by mail, or through the local registrar, every physician, informant, undertaker, or other person having knowledge of the facts relative to any birth or death, shall supply such information as he may possess upon a form provided by the state registrar or upon the original birth or death certificate.

2415. PRIVATE GENEALOGICAL RECORDS. If any person, organization, company, society, or association is in possession of any record of births or deaths which may be of value in establishing the genealogy of any resident of this state, such person, company, society, or association may file such record, or a duly registrar shall preserve such record or transcript thereof, with the state registrar. The state registrar shall preserve such record of transcript and make an index thereof in such form as to facilitate the finding of any information contained therein. Such record and index shall be open to public inspection, subject to such reasonable conditions as the state registrar may prescribe.

2416. CERTIFIED COPIES. The state registrar shall, upon request, supply to any applicant for any proper purpose, a certified copy of any record filed under section 2415. For his services, the state registrar shall charge a fee of fifty cents for each hour or fractional part of an hour spent in making such copy, and twenty-five cents for attaching his certificate thereto.

2417. FEE. Each local registrar shall be paid twenty-five cents for each birth or death certificate properly executed, filed, recorded, and returned to the county registrar, as required by law.

2418. FEE FOR REPORTING NO REGISTRATION. In case no birth or death is registered during any month, the local registrar shall be paid the sum of twenty-five cents for a report to that effect, made within the time prescribed in this chapter.

2419. NO FEE FOR REGISTERING PHYSICIANS. No fee or other compensation shall be charged by any local registrar to any physician, undertaker, or casket dealer for registering his name under this chapter or making return thereof to the state registrar.

2420. PAYMENT OF LOCAL REGISTRARS. All amounts payable to a registrar under the provisions of this chapter shall be paid by the county in which the registration district is located, immediately upon certification by the state registrar, in the manner in which other claims are paid by the county. The state registrar shall annually, or at such other times as he may deem expedi-

ent, certify to the auditor of each county the number of births and deaths properly registered in said county, with the name of each registrar and the amount due him as fees under the provisions of this chapter.

2421. RECORD BOOK OF MARRIAGES AND DIVORCES. The clerk of the district court in each county shall keep a record book for marriages and a record book for divorces. The form of said books shall be uniform throughout the state and shall be prescribed by the state department. Said books shall be provided at the expense of the county. (C24, 27, 31, 2421.)

2422. CONTENTS OF RECORD BOOK FOR MARRIAGES. The record book for marriages shall show the same items and personal particulars for each marriage solemnized in the county as are required in the return of a marriage as prescribed by the chapter on "Marriage" in the title on "Domestic Relations."

2423. CONTENTS OF RECORD BOOK FOR DIVORCES. The record book for divorces shall show the following items for each divorce granted in the county:

1. Full name, color, age, nationality, and number of prior marriages of each of the parties.
2. Date of marriage.
3. Cause of divorce.
4. Date of divorce.
5. Person to whom divorce granted (husband or wife).
6. Such additional data respecting each divorce as the state department may prescribe.

2424. SOURCE OF ENTRIES. The items respecting each marriage shall be taken from the return thereof, and the items respecting each divorce shall be taken, as far as possible, from the court records. The other data necessary to complete the entries in the record book of divorces shall be supplied by the parties to the action or by their attorneys.

2425. MARRIAGES AND DIVORCES. The clerk of the district court shall on or before the first day of February of each year transmit to the state registrar:

1. All the original returns of marriages filed in his office the preceding calendar year.
2. A copy of the entries made in the record book for divorces for every divorce granted in the county during the preceding calendar year.
3. Such other data relative to marriages and divorces as the state registrar may prescribe.

NOTE: In general practice, however, it has proven more efficient and satisfactory to have these reports submitted monthly.

2426. CERTIFIED COPIES. The state registrar or any county registrar shall, upon request, supply to any applicant for any proper purpose, a certified copy of the record of any birth, death, or marriage registered under the provisions of this chapter, for the making and certifying of which he shall charge a fee of fifty cents.

2427. SEARCH OF RECORDS—FEE. In cases in which search of the files and records is made, but no certified copy is requested, or the requested record is not found the state registrar shall charge a fee of fifty cents for each hour or fractional part of an hour spent in search.

2428. FREE CERTIFIED COPIES. Upon request of any parent or guardian, the state registrar shall supply, without charge, a certificate limited to a statement as to the date of birth of any child, when the same shall be necessary for admission to school or for purpose of securing employment.

2429. UNITED STATES CENSUS BUREAU. The United States census bureau shall have the privilege of making, at its own expense and without paying the legal fees, copies of all records and vital statistics provided for in this chapter.

2430. ACCOUNTING FOR FEES. The state registrar shall keep a true and correct account of all fees received by him and turn the same over to the state treasurer as provided by law.

2431. COPIES OF RECORD AS EVIDENCE. Any certified copy of the record of a birth, death, or marriage, made under this chapter, shall be presumptive evidence in all courts and places of the facts therein stated.

2432. SYSTEM EXCLUSIVE. No system for the registration of births, deaths, or marriages shall be maintained in the state or any of its political subdivisions other than the one provided for in this chapter.

2433. INVESTIGATION. The state department shall have authority to investigate cases of irregularity or violation of the law relative to the registration of vital statistics and the disposal of dead bodies, and all registrars shall aid the department in such investigation.

2434. DUTY OF COUNTY ATTORNEY. The state department shall report, when deemed necessary, cases of violation of said law to the proper county attorney, with a statement of the facts and circumstances; and when any such case is reported to such county attorney he shall forthwith initiate and promptly follow up the necessary court proceedings against the person responsible for the alleged violation of law.

2435. DUTY OF ATTORNEY GENERAL. Upon request of the state department, the attorney general shall assist in the enforcement of the provisions of this chapter and of the chapter relative to the disposal of dead bodies.

2436. PENALTY. Any person violating any of the provisions of this chapter or of any rule of the state department relative thereto, or falsifying any certificate of birth or any record established by this chapter, shall be fined not less than five dollars nor more than one hundred dollars, or be imprisoned not more than thirty days in the county jail, or be punished by both such fine and imprisonment.

2437. SECOND OFFENSE. If any person who has been convicted under section 2436 shall be again convicted to a violation of any of the provisions of this chapter or of any rule of the state department relative thereto, on a similar charge, he shall be punished by a fine of not less than twenty-five dollars nor more than two hundred dollars, or by imprisonment in the county jail not to exceed sixty days, or by both such fine and imprisonment; and if a physician, he shall in addition, have his license to practice his profession revoked; but such former conviction shall be referred to in the indictment or information, stating the court, date, and place that judgment was rendered.

LAWS PERTAINING TO DISPOSAL OF DEAD BODIES

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|--|---------------------------------------|
| 2318 Certificate and burial permit | 2333 Shipping permit |
| 2319 Execution and filing | 2334 Importation of bodies |
| 2320 Contents of certificate | 2335 Permit for imported bodies |
| 2321 Particulars. | 2336 Shipments for scientific purpose |
| 2322 Deaths without medical attendance | 2337 Disinterment for reburial |
| 2324 Issuance of burial permit | 2338 Disinterment for autopsy |
| 2325 Fee | 2343 Method of making a disinterment |
| 2326 Completeness of certificate | 2344 Delivery of burial permit |
| 2327 Communicable diseases | 2345 Duty of sexton |
| 2328 Burial permit | 2346 Indorsement and return of permit |
| 2329 Burial in foreign district | 2347 Record of burials |
| 2330 Transportation of bodies | 2348 No person in charge of cemetery |
| 2331 Papers to be carried by escort | 2349 Forged papers |
| 2332 Shipment by express | 2350 Penalty |

2318 CERTIFICATE AND BURIAL PERMIT. No person, without securing a proper death certificate and a burial or removal permit, shall:

1. Keep a dead body for more than seventy-two hours after death or discovery of same.
2. Remove such body from or into any registration district in this state. Provided, that in cases where it is impossible to secure such certificate, burial or removal permit without delay, the state registrar may permit the attending embalmer or his registered student, to remove a body from or into any registration district in the state on the condition that such certificate, burial or removal permit will be secured and properly filed before the body is buried or otherwise disposed of, said permit to be executed in triplicate on a form prepared by the state department of health.

(NOTE: The use of a "Notice of Removal" form by a funeral director does not relieve him of the responsibility of filing the death certificate in the county where death occurred.)

The local registrar in the community where burial takes place is permitted to issue a courtesy burial permit upon receipt of a copy of the "Notice of Removal" form without the death certificate being filed with him, since in such cases the death certificate will be filed by funeral director in registration area where death occurred.

A courtesy burial permit will be a regular burial permit, numbered in the usual way with the word "Courtesy" written across the face of the permit.

3. Bury or make other final disposition of such body in this state.

2319. EXECUTION AND FILING. The undertaker or other person in charge of the funeral or disposition of the body of every person dying in this state shall be responsible for the proper execution of a death certificate, which shall be filled out in durable black ink, in a legible manner, and filed with the local registrar of the registration district in which the death occurred or the body was found.

2320. CONTENTS OF CERTIFICATE. The certificate of death shall be executed on the United States standard form, approved by the bureau of the census.

NOTE: All item instructions for preparation of certificate.

2321. PARTICULARS. In the execution of a death certificate, the personal particulars shall be obtained from the person best qualified to supply them. The death and last sickness particulars shall be furnished by the attending physician,

or in the absence of such person, or if there be no such person, by the coroner. The burial particulars shall be supplied by the undertaker or person acting as such. Each informant shall certify to the particulars supplied by him by signing his name below the list of items furnished.

2322. DEATHS WITHOUT MEDICAL ATTENDANCE. In case of any death occurring without medical attendance, the undertaker, or person acting as such, shall promptly report the case to the coroner. In such cases the coroner shall furnish such information as may be required by the state registrar in order to classify the death.

2324. ISSUANCE OF BURIAL PERMIT. Upon receipt of a death certificate the local registrar shall:

1. If the certificate is properly executed and complete, issue a burial or removal permit, as may be desired, to the undertaker or other person filing the same.
2. If the certificate is incomplete or improperly executed, return such certificate to the undertaker or other person filing the same for immediate correction.

Any person supplying any of the particulars in such certificate shall complete or correct the same in accordance with the directions of the local registrar.

2325. FEE. No fee shall be charged by a local registrar for the issuance of a burial permit.

2326. COMPLETENESS OF CERTIFICATE. No certificate of death shall be held complete and correct that does not supply all of the particulars called for in the United States standard form certificate, detailed in accordance with the rules of the state department of health, or satisfactorily account for their omission.

2327. COMMUNICABLE DISEASES. In case a death occurs from some communicable disease, as defined in the chapter on contagious and infectious diseases, no permit for the removal or other disposition of the body shall be issued by the local registrar, except under such rules as may be prescribed by the State Department.

2328. BURIAL PERMIT. The burial or removal permit shall be issued upon a form prescribed by the state department and shall state:

1. The name, age, sex, cause of death, and other necessary details required by the state department.
2. That a satisfactory certificate of death has been filed as required by law.
3. That permission is granted to inter, remove, or otherwise dispose of the body.

2329. BURIAL IN FOREIGN DISTRICT. No burial permit shall be required from the local registrar of the district in which a burial is to be made, when a body is removed from one district to another district in this state, for purpose of final disposition.

2330. TRANSPORTATION OF BODIES. No person or common carrier shall ship or receive for shipment within this state or to any point outside the state, by any public conveyance, a dead body unless the box containing the corpse shall have attached thereto an embalmer's certificate showing the name and official number of the embalmer by whom the body was prepared, and the method of preparation employed.

2331. PAPERS TO BE CARRIED BY ESCORT. In addition to the require-

ments of section 2330, the person accompanying the body shall have in his possession:

1. A copy of the physician's or coroner's certificate of cause of death.
2. A transit permit issued by the local board or local registrar.

2332. SHIPMENT BY EXPRESS. When the body is shipped by express a copy of the certificate of cause of death and the transit permit shall be attached to the waybill and delivered with the body at destination.

2333. SHIPPING PERMIT. All transit permits shall be issued by the local board or local registrar upon application of an embalmer and shall be signed by the local health officer or local registrar. No transit permit shall be issued to any embalmer who is not in good standing as shown by the records of the state department.

2334. IMPORTATION OF BODIES. A body imported from outside the state shall be subject to the same rules as to transportation as bodies shipped from within the state.

2335. PERMIT FOR IMPORTED BODIES. When a dead body is transported from outside this state into the state for final disposition, the transit or removal permit, issued in accordance with the law and health regulations of the place where the death occurred, shall be accepted by the local registrar of the district into which the body is transported, as a basis upon which to issue a local burial permit. The fact that such body was shipped into this state for burial and the actual place of death shall be noted on the face of the burial permit by the local registrar.

2336. SHIPMENTS FOR SCIENTIFIC PURPOSES. The provisions of this chapter relating to the transportation and importation of dead bodies, shall not be applicable to the shipment within this state of dead bodies intended for use for scientific purposes when the same are so designated by the shipper. Such bodies shall be prepared and shipped under special rules provided for that purpose by the state department.

2337. DISINTERMENT FOR REBURIAL. No person shall disinter the dead body of a human being for removal from one grave to another in the same cemetery or for removal to another cemetery without obtaining from the state department a permit for that purpose, and the department may by rule entirely prohibit disinterments for such purpose of the bodies of persons who have died of extremely contagious diseases. A dead body, properly prepared by an embalmer and deposited in a receiving vault, however, shall not be considered as a buried body within the meaning of this section.

2338. DISINTERMENT FOR AUTOPSY. No person shall disinter the dead body of a human being for the purpose of holding an autopsy thereon in order to determine the cause of death without obtaining for that purpose either:

1. An order of the district court of the county in which the body is buried, or
2. A special permit from the state department of health.

2343. METHOD OF MAKING A DISINTERMENT. Every disinterment shall be made by an embalmer and shall be performed in accordance with rules of the state department governing the same.

2344. DELIVERY OF BURIAL PERMIT. The undertaker, or person acting as such, shall deliver the burial, removal, or disinterment permit to the person in charge of the cemetery before interring, disposing of, or disinterring any body therein.

2345. DUTY OF SEXTON. The person in charge of every cemetery shall see that all the requirements of this chapter relative to burial, removal and dis-

interment permits have been complied with before any burial, disposal, or disinterment is made in said cemetery.

2346. INDORSEMENT AND RETURN OF PERMIT. Such person shall indorse upon said permit the date of burial, disposal, or disinterment, over his signature and shall return the same to the local registrar of the district in which the cemetery is located within ten days from the date of burial, or within the time fixed by the state department. In case reburial is made in another cemetery after disinterment, the disinterment permit shall accompany the body and shall be dealt with as an original burial permit.

2347. RECORD OF BURIALS. The record-keeping officer of every cemetery shall make and keep a permanent record of all burials, disposals, disinterments, or reburials made in such cemetery, which record shall at all times be open to public inspection. This record shall, in each case, state the name of each deceased person, place of death, date of burial, disposal, disinterment, or reburial, and name and address of undertaker.

2348. NO PERSON IN CHARGE OF CEMETERY. In case there is no person in charge of the cemetery, the undertaker, or person acting as such, shall sign said permit, giving the date of burial, disposal, or disinterment, and shall write across the face of said permit the words "No person in charge," and file the same, within ten days, with the local registrar of the district in which the cemetery is located.

2349. FORGED PAPERS. Any person who shall issue a forged death certificate, burial, removal, disinterment, or transit permit, or who shall certify falsely as to the cause of death or the preparation of a dead body, shall be guilty of forgery and punished accordingly.

2350. PENALTY. Any person who shall violate any provision of this chapter shall be fined not less than five dollars nor more than one hundred dollars, or be imprisoned not more than thirty days in the county jail, or be punished by both such fine and imprisonment.



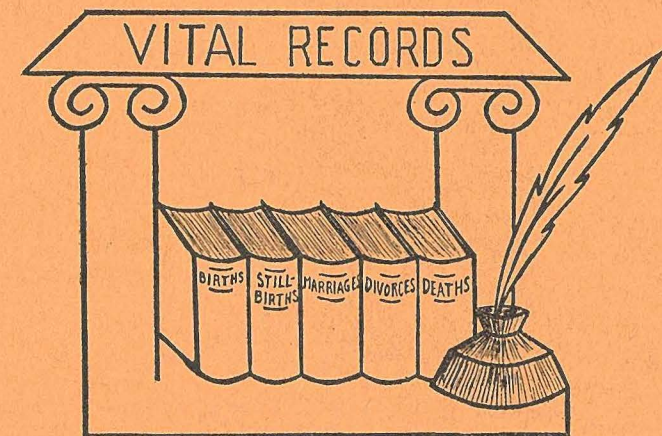
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INSTRUCTION MANUAL

For Preparation
of

VITAL RECORDS



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