

(1) PLACE OF BIRTH

County of UnionTownship of First Ham

Inc. Town of

City of Carlisle

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

541

Registration District No. 4.2.3Registered No. 8
(For use of Local Registrar)

(2) Full Name of Child

James Arthur Crosby

(3) SEX OR GAL <u>Boy</u>	(4) Twin or Triplet To be answered only in case of Twin or Triplet	(5) Number in order of birth <u>3</u>	(6) Age years <u>ye</u>	(7) DATE BIRTH <u>Mar 9 1923</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL
NAME James Crosby(9) PRESENT
POSTOFFICE
OF FATHER Carlisle S.C.(10) COLOR
OR
HAIR Blk (11) AGE AT LAST
BIRTHDAY 23
(Year)(12) BIRTHPLACE S.C.(13) OCCUPATION Farming(14) Number of children born to
mother, including present birth 3

MOTHER.

(14) NAME BEFORE
MARRIAGE Hattie Savage(15) PRESENT
POSTOFFICE
OF MOTHER Carlisle S.C.(16) COLOR
OR
HAIR Blk (17) AGE AT LAST
BIRTHDAY 31
(Year)(18) BIRTHPLACE S.C.(19) OCCUPATION Farming(20) Number of children of this mother
now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) Manda Curston(23) State whether Physician or Midwife midwife(24) Address of Physician or Midwife Carlisle S.C.(Given name added from a supplement
report)Mar 9 1923
Registrar(25) Witness
(Signature of Witness necessary only
when question 23 is signed by mark)(26) Filed Mar 9 1923 (27) Mar 9 1923
Local Registrar*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths
before the fifth month of pregnancy.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD. And mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

Revised by Columbia, Columbia, S. C.