

Form No. 1

(1) PLACE OF BIRTH

County of Dorchester  
 Township of Collins  
 or  
 Inc. Town of .....  
 or  
 City of .....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only

17492

Registration District No. 1706 Registered No. 13  
 (For use of Local Registrar)

(No. .... St.; .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Julius Truman Jr If child is not yet named, make supplemental report as directed

3. BOY OR GIRL Boy 4. Twin or Triplet? Twin 5. Number in order of birth 2 6. Are Parents Married? yes 7. DATE OF BIRTH Jan 22, 1923  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

8. FULL NAME Julius Truman  
 9. PRESENT POSTOFFICE OF FATHER Summerville, S.C.  
 10. COLOR OR RACE Colored 11. AGE AT LAST BIRTHDAY 38 (Years)  
 12. BIRTHPLACE Dorchester Co  
 13. OCCUPATION Farming  
 20. Number of children born to mother, including present birth nine 9

MOTHER.

14. NAME BEFORE MARRIAGE Maggie Middleton  
 15. PRESENT POSTOFFICE OF MOTHER Summerville, S.C.  
 16. COLOR OR RACE Colored 17. AGE AT LAST BIRTHDAY 27 (Years)  
 18. BIRTHPLACE Dorchester Co  
 19. OCCUPATION Housewife  
 21. Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Herbert Perry (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Summerville, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed July 22, 1923 (28) R. F. Boyle 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.