

(1) PLACE OF BIRTH

County of ChathamTownship of EnclaveInc. Town of EnclaveCity of Enclave

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

(2) Full Name of Child Dr. name

File No. - For State Registrar Only

31633

Registered No. 73
(For use of Local Registrar)(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept - 10 - 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Dennis Gadsden(9) PRESENT POSTOFFICE OF FATHER SC(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 40
(Years)(12) BIRTHPLACE SC(13) OCCUPATION farmer(20) Number of children born to mother, including present birth 1 - 5

MOTHER.

(14) NAME BEFORE MARRIAGE Ellen Desbue(15) PRESENT POSTOFFICE OF MOTHER SC(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 38
(Years)(18) BIRTHPLACE SC(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 1 - 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born at 124 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Abbie James(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife SC

Given name added from a supplemental report

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

(27) Filed Sept 11 - 12 - 22 (28) J. H. N. 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.