

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.

(1) PLACE OF BIRTH County of <u>Christfield</u> Township of <u>Peep Hole</u> or Inc. Town of or City of (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 29629	
Registration District No. <u>1208</u>		Registered No. (For use of Local Registrar)			
(2) Full Name of Child <u>Nelson Graham</u>		{ If child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Mrs</u>	(7) DATE OF BIRTH <u>July 16</u> 19 <u>22</u> (Name of Month) (Day) (Year)	
FATHER			MOTHER		
(8) FULL NAME <u>Pete Graham</u>			(14) NAME BEFORE MARRIAGE <u>Annie Carter</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Society Hill</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Society Hill</u>		
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>43</u> (Years)		(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>40/abn</u> (Years)	
(12) BIRTHPLACE <u>South Carolina</u>			(18) BIRTHPLACE <u>South Carolina</u>		
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>House and field work</u>		
(20) Number of children born to mother, including present birth {			(21) Number of children of this mother now living, including present birth {		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was at M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>James H. Brown</u>					
(24) State whether <u>Physician or Midwife</u>					
(25) Address of <u>Physician or Midwife</u> <u>Society Hill</u>					
Given name added from a supplemental report			(26) Witness <u>J. S. Masterson</u> (Signature of Witness necessary only when question 23 is signed by mark)		
19			(27) Filed 19		
Registrar			Local Registrar		

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