

(1) PLACE OF BIRTH

County of ChesterTownship of SpartanvilleInc. of Rodman

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

6436

Registration District No. 1106Registered No. 26

(For use of Local Registrar)

(2) Full Name of Child Sarah Irene Brown

If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>no</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Feb. 20, 1923</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Ernest Brown</u>			(14) NAME BEFORE MARRIAGE <u>Lucie Peterson</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Rodman S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Rodman S.C.</u>	
(10) COLOR OR RACE <u>colored</u>	(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)	(16) COLOR OR RACE <u>colored</u>		
(12) BIRTHPLACE <u>Chester County</u>		(17) AGE AT LAST BIRTHDAY <u>23</u> (Years)		
(13) OCCUPATION <u>Farming</u>		(18) BIRTHPLACE <u>Chester County</u>		
(19) OCCUPATION <u>Farming</u>		(20) BIRTHPLACE <u>Chester County</u>		
(21) Number of children born to mother, including present birth <u>3</u>			(22) Number of children of this mother now living, including present birth <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(23) I hereby certify that I attended the birth of this child, who was born alive at 9 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(24) (Signature) Emma Wood

(25) State whether Physician or Midwife (26) Address of Physician or Midwife

MidwifeRodman S.C.

Given name added from a supplemental report

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

(28) Filed 3/19, 1923 (29) 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.

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