

MARGIN RESERVED FOR INDEXING.

Form No. 6

WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 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 1.

(1) PLACE OF BIRTH

County of Richland

Township of Blythewood

Inc. Town of

City of

CERTIFICATE OF BIRTH

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

No. for this birth
37442

Registration District No. 8800

Registered No. 187
 (For use of Local Registrar)

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

(2) Full Name of Child Florence Antoinette Brown

(3) SEX OR CHILD Girl (4) Type of Birth Yes (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH NO 18 23
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER. (8) FULL NAME Cook Brown (9) PRESENT RESIDENCE OF FATHER Columbia SC (10) COLOR OF FATHER White (11) AGE AT LAST BIRTHDAY 29 (12) BIRTHPLACE Blythewood SC (13) OCCUPATION Nurse (14) NUMBER OF CHILDREN BORN TO FATHER, INCLUDING PRESENT BIRTH 3

MOTHER. (15) NAME BEFORE MARRIAGE Tram Nesbit (16) PRESENT RESIDENCE OF MOTHER Columbia SC (17) COLOR OF MOTHER White (18) AGE AT LAST BIRTHDAY 27 (19) BIRTHPLACE Sumter SC (20) OCCUPATION Housewife (21) NUMBER OF CHILDREN OF THIS MOTHER NOW ALIVE, INCLUDING PRESENT BIRTH 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive on the date above stated. (Sign alive or stillborn) (Hour A. M. or P. M.) 4a

(23) (Signature) L. A. Brown (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Blythewood

Given name added from a supplemental report Martin A. Anderson (26) Witness (Signature of Witness necessary only when question 23 is signed by mark) W. A. McLean (27) Date Nov 20 1923 (28) 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.

Local Registrar. (Signature) W. A. McLean 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.