

Form No. 1

(1) PLACE OF BIRTH

County of Orangeburg
 Township of city
 OR
 Inc. Town of
 OR
 City of Or. b. g.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
43930

Registration District No. 3.6.6. Registered No. 195
 (For use of Local Registrar)
 (No. 91 Broughton St.; over Ward)

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

(2) Full Name of Child

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 22 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Herbert Scott
 (9) PRESENT POSTOFFICE OF FATHER Or. b. g. 20
 (10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 23
 (Years)
 (12) BIRTHPLACE Or. b. g. 20
 (13) OCCUPATION Laborer

MOTHER.

(14) NAME BEFORE MARRIAGE Elzina Brunsen
 (15) PRESENT POSTOFFICE OF MOTHER Or. b. g. 20
 (16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY 22
 (Years)
 (18) BIRTHPLACE Orangeburg, S.C.
 (19) OCCUPATION Nurse

(20) Number of children born to mother, including present birth 2 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... alive... at... 11 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Kena Aulman
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Orangeburg, 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 Jan 3 - 1923 (28) W. H. Kuhn 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.