

(1) PLACE OF BIRTH
County of Albany
Township of Midtville
City of

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

138

Registration District No. 4.15.04 Registered No.
(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 Larry Brown If child is not yet named, make supplemental report as directed

(3) SEX OR CHILD girl (4) Type or White (5) Number in order of birth 1 (6) Age 2 1/2 (7) DATE OF BIRTH Jan 9 1923
(Date of Month) (Day) (Year)

FATHER.
(8) FULL NAME Levi Brown
(9) PRESENT RESIDENCE OF FATHER Midtville
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 37
(12) BIRTHPLACE South Car
(13) OCCUPATION Farming
(14) Number of children born to mother, including present birth 1

MOTHER.
(15) NAME BEFORE MARRIAGE Dont know
(16) PRESENT RESIDENCE OF MOTHER Midtville S.C.
(17) COLOR OR RACE Negro (18) AGE AT LAST BIRTHDAY 30
(19) BIRTHPLACE South Car
(20) OCCUPATION house keeping
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Wm. Watson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Midtville

Given name added from a supplemental report
Wm. Watson
Jan 9 1923
Registered

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
Jan 9 1923 (27) Filed Jan 9 1923 (28) J. A. Brown
Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.