

FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 2.
 Section of Columbia, Columbia, S.C.

(1) PLACE OF BIRTH

County of Cherokee
 Township of Cherokee
 Inc. Town of
 City of

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

File No. — For State Registrar Only
31536

Registration District No. 1000 A Registered No. 96
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St. Ward)

(2) Full Name of Child Ninona Dorris Hubbard (If child is not yet named, make supplemental report as directed)

(3) SEX <u>Female</u>	(4) Twin or Triplet To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married <u>Yes</u>	(7) DATE OF BIRTH <u>Sept 9, 1923</u> (Name of Month) (Day) (Year)
--------------------------	--	------------------------------	---------------------------------------	--

FATHER.

(8) FULL NAME Samuel B. Hubbard

(9) PRESENT POSTOFFICE OF FATHER Blacksburg SC

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40 (Years)

(12) BIRTHPLACE Currie NC

(13) OCCUPATION Farmer & Merchant

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Bregman

(15) PRESENT POSTOFFICE OF MOTHER Blacksburg SC

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33 (Years)

(18) BIRTHPLACE Blenheim SC

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 3
 (21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at Blacksburg on the date above stated. (Hour 6 A. M. or P. M.)

(23) (Signature) John M. Roberts
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Blacksburg

Given name added from a supplemental report

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

(27) Filed Sept 20, 1923 (28) John M. Roberts 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.