

Form No. 1

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

County of

Township of

or

Inc. Town of

or

City of

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No.

Registered No. 28
(For use of Local Registrar)

(No.St.)

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 Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married

Yes

(7) DATE OF BIRTH

July 20, 23
(Month of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Claude Alma Young

(9) PRESENT POSTOFFICE OF FATHER

Sumner Branch

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

33
(Years)

(12) BIRTHPLACE

Edgefield Co. S.C.

(13) OCCUPATION

Barber

MOTHER.

(14) NAME BEFORE MARRIAGE

Leona Bodie

(15) PRESENT POSTOFFICE OF MOTHER

Sumner Branch

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

23
(Years)

(18) BIRTHPLACE

Lincoln Co. Ga.

(19) OCCUPATION

Housewife

(20) Number of children born to mother, including present birth

3

(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
on the date above stated.at 1 a. M.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Oct 9, 23

(28)

B. Adams
Local Registrar

*When there was no attending physician or midwife, then the father, householders, 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.