

Form No. 1.

(1) PLACE OF BIRTH

County of Aiken

Township of Chinquapien

or  
Inc. Town of

or  
City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

71070

Registration District No. 202 Registered No. 15

(For use of Local Registrar)

St.; Ward

(2) Full Name of Child Phily Newson Brown If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth 2

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Aug. 20, 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Oscar L. Brown

(9) PRESENT POSTOFFICE OF FATHER Hatesburg SC

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 46 (Years)

(12) BIRTHPLACE Aiken County SC

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Therence Carter

(15) PRESENT POSTOFFICE OF MOTHER Batesburg SC

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Thorpfield CO

(19) OCCUPATION House wife

(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 born at alone M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. B. Edwards

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Bridge Springs SC

Given name added from a supplemental report

191...

Registrar

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

(27) Filed Sept. 10, 1916 (28) H. B. Hester 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.

MARGIN RESERVED FOR FINDING  
WHITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
N.B.—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 5.  
McClaw, of Columbia