

TRACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

County of Northham

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Township of OrkneyCity of CamdenRegistration District No. 27Registered No. 12

(For use of Local Registrar)

City of Camden

(No. 1608--62 Mr. Name)

Ward

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

(2) Full Name of Child William James Jones Brown If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Feb. 7, 1923 (Name of Month) (Day) (Year)

FATHER. MOTHER.

(8) FULL NAME Henry Arthur Brown (14) NAME BEFORE MARRIAGE Miss Virginia Jones(9) PRESENT POSTOFFICE OF FATHER Camden (15) PRESENT POSTOFFICE OF MOTHER Camden SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 39 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Fairfield Co (18) BIRTHPLACE Missouri(13) OCCUPATION Dr. Ag (19) OCCUPATION House wife(20) Number of children born to mother, including present birth Two (21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born on Feb. 7, 1923 at 3.30 P. (Hour A. M. or P. M.)(23) (Signature) W. H. C. Brown (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Camden

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by W. H. C. Brown)(27) Filed Mar. 19, 1923 (28) W. H. C. Brown 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.

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