

## 1) PLACE OF BIRTH

County of Abbeville  
 Township of Abbeville  
 or  
 Mc. Town of .....  
 or  
 City of Abbeville

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

No. 10.—For State Registrar Only  
**26771**

Registration District No. 1ARegistered No. 79  
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 (No. 148 St. Marie St. 1 Ward)

2) Full Name of Child Lee Thomas Brown

If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL Boy (2) Type of Triplet ..... (3) Number in order of birth ..... (4) Are Parents Married Yes (5) DATE OF BIRTH Sept 8 1923  
 (Month of Month) (Day) (Year)

**FATHER.**  
 (10) FULL NAME Archibald Brown  
 (11) PRESENT POST OFFICE OF FATHER Abbeville SC  
 (12) COLOR OR RACE White (13) AGE AT LAST BIRTHDAY 30 (Year)  
 (14) BIRTHPLACE Dadeville Ala  
 (15) OCCUPATION Mill Operator  
 (16) Number of children born to mother, including present birth 7

**MOTHER.**  
 (10) NAME BEFORE MARRIAGE Miss Mary  
 (11) PRESENT POST OFFICE OF MOTHER Abbeville SC  
 (12) COLOR OR RACE White (13) AGE AT LAST BIRTHDAY 20 (Year)  
 (14) BIRTHPLACE Dadeville Ala  
 (15) OCCUPATION Housewife  
 (16) Number of children of this mother now living, including present birth 7

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was born alive at 7:25 A.M. on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)

(21) (Signature) M. Brown  
 (22) State whether Physician or Midwife Physician (23) Address of Physician or Midwife Abbeville SC

Given name added from a supplemental report

(24) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
 (25) Filed Sept 9 1923 (26) Miss Julia M. Wallis 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 stillbirth before the fifth month of pregnancy.

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