

MARGIN RESERVED FOR BINDING. WHEN FILLING IN THIS IS A PERMANENT RECORD. WITH STADING IN THIS IS A SEPARATE BLANK FOR EACH CHILD, and mark the FIRST BORN, No. 1; THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Maryland
 Township of Princeton
 or
 Inc. Town of.....
 or
 City of

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

File No.—For State Registrar Only

19428

Registration District No 3208 Registered No. 24...
 (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 Bessie Louise If child is not yet named, make supplemental report as directed

3. BOY OR GIRL? <u>Girl</u>	4. Twin or Triplet? To be answered only in case of Twins or Triplets	5. Number in order of birth	6. Are Parents Married? <u>yes</u>	7. DATE OF BIRTH <u>June 18, 22</u> (Month) (Day) (Year)
FATHER.			MOTHER.	
8. FULL NAME <u>Ruben Gause</u>			14. NAME BEFORE MARRIAGE <u>Lucian Gause</u>	
9. PRESENT POSTOFFICE OF FATHER <u>Greesham S.C.</u>			15. PRESENT POSTOFFICE OF MOTHER <u>Greesham S.C.</u>	
10. COLOR OR RACE <u>Colored</u>	11. AGE AT LAST BIRTHDAY <u>25</u> (Years)	16. COLOR OR RACE <u>col</u>		
12. BIRTHPLACE <u>S.C.</u>	17. AGE AT LAST BIRTHDAY <u>22</u> (Years)			
13. OCCUPATION <u>Farming</u>	18. BIRTHPLACE <u>S.C.</u>			
19. OCCUPATION <u>Housewife</u>			20. Number of children of this mother now living, including present birth <u>two</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Born alive at 10 P.M.
 on the date above stated. (Born alive or Stillborn) (Hour A.M. or P.M.)
 (23) (Signature) Marie Graves
 (24) State whether Physician or Midwife " " (25) Address of Physician or Midwife
Greesham S.C.

(26) Witness
 (Signature of Witness necessary only when question 25 is signed by mother)
 (27) Date June 22, 22 (28) W. J. Frazier
 Local Registrar

If the attending physician or midwife, then the father, householder, etc., should make this return. It must not be reported as stillborn. No report is desired of stillbirths before the 15th month of pregnancy.