

## (1) PLACE OF BIRTH

County of Windsor  
 Township of Lane  
 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

30493

Registration District No. 4305 Registered No. 74  
 (For use of Local Registrar)

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

(2) Full Name of Child Evelyn Stewart (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 Sept 29th 1923  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Robert M. Stewart  
 (9) PRESENT POSTOFFICE OF FATHER Lanes, S.C.  
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 54 (Year)  
 (12) BIRTHPLACE Berkeley co. S.C.  
 (13) OCCUPATION farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE Bertha White  
 (15) PRESENT POSTOFFICE OF MOTHER Lanes, S.C.  
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 29 (Year)  
 (18) BIRTHPLACE Clarendon co. S.C.  
 (19) OCCUPATION farm laborer

(20) Number of children born to mother, including present birth 3 (21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11:20 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Father

(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 22 is signed by mark)

(27) Filed Oct 9th 1923 (28) W. H. Moseley Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.