

(1) PLACE OF BIRTH

County of MaconTownship of Macon
or
Inc. Town ofCity of (No. St.; Ward)
(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

Registration District No. 32A Registered No. 30
(For use of Local Registrar)

File No. - For State Registrar Only

7780

(2) Full Name of Child

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

(7) Sex of Child <u>Girl</u>	(8) Twin or Triplet? To be answered only in case of Twins or Triplets	(9) Number in order of birth	(10) Are Parents Married? <u>yes</u>	(11) DATE OF BIRTH <u>Mar 13, 1923</u> (Name of Month) (Day) (Year)
(12) FATHER'S FULL NAME <u>Joe Oliver</u>			(13) MOTHER'S NAME BEFORE MARRIAGE <u>Louise Goudreau</u>	
(14) PRESENT POSTOFFICE OF FATHER <u>Macon, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Macon, S.C.</u>	
(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>23</u> (Years)	(18) COLOR OR RACE <u>Negro</u>	(19) AGE AT LAST BIRTHDAY <u>23</u> (Years)	
(20) BIRTHPLACE <u>Georgia</u>			(21) BIRTHPLACE <u>Georgia</u>	
(22) OCCUPATION <u>Full work</u>			(23) OCCUPATION <u>Cooking</u>	
(24) Number of children born to mother, including present birth <u>1</u>			(25) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(26) I hereby certify that I attended the birth of this child, who was Conceive at M.,
on the date above stated. (Born alive or stillborn? (Hour A. M. or P. M.)(27) Signature
Oliver Pickens

(28) Position or Profession as Midwife

(29) Signature of Physician or Midwife
Macon, S.C.

Given name added from a supplemental report

(30) Witness
(Signature of Witness necessary only when question 26 is signed by male)(31) Filed Apr 10, 1923(32) Local Registrar
Leva Monte

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.