

(1) PLACE OF BIRTH

County of MoultrieTownship of Brownsvilleor
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

23182

Registration District No. 3203Registered No. 30
(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

Lucile Mae Mauldin

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 Twins or Triplets(5) Number in order of birth
6(6) Are Parents Married?
yes(7) DATE OF BIRTH June 19, 22
(Date of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Isreal Mauldin

(9) PRESENT POSTOFFICE OF FATHER

Brownsville(10) COLOR OR RACE
O(11) AGE AT LAST BIRTHDAY 35
(Years)

(12) BIRTHPLACE

Moultrie

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

6

MOTHER.

(14) NAME BEFORE MARRIAGE

Ludenia Coker

(15) PRESENT POSTOFFICE OF MOTHER

Brownsville

(16) COLOR OR RACE

(17) AGE AT LAST BIRTHDAY 23
(Year)

(18) BIRTHPLACE

Dorchester Co

(19) OCCUPATION

John Brown

(21) Number of children of this mother now living, including present birth

6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6 AM on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Nancy Coker

(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 23 is signed by marks)

(27) Filed July 1, 22(28) P. T. Jones

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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