

(1) PLACE OF BIRTH

County of Cashman
 Township of Amelia
 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

377

Registration District No. Des Registered No. 2
 (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 Nikolman Anderson

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

(3) SEX OF CHILD girl (4) Twin or Triplet — (5) Number in order of birth — (6) Are Parents Married yes (7) DATE OF BIRTH Aug 13 1923
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Joseph Anderson(9) PRESENT POSTOFFICE OF FATHER St. Matthews(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 28 (Year)(12) BIRTHPLACE South Carolina(13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Annie Belle Jackson(15) PRESENT POSTOFFICE OF MOTHER St. Matthews(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 27 (Year)(18) BIRTHPLACE South Carolina(19) OCCUPATION House Work

(20) Number of children born to mother, including present birth 6 (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 at 12 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Nellie Jackson

(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife St. Matthews

Give name added from a supplemental report

(26) Witness J. R. Rake
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Aug 17 1923 (28) J. R. Rake
 Registrar 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 still born. No report is desired of stillbirths before the fifth month of pregnancy.