

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Chesterfield, S.C.
 Township of Cheraw, S.C.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

3410

Inc. Town of Registration District No. 1201 Registered No. 16
 (For use of Local Registrar)
 City of (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 Silvia Marshall { If child is not yet named, make supplemental report as directed

(3) ~~Boy~~ OR GIRL? girl (4) Twin or Triplet? John Marshall (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 13, 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Cuffie Marshall
 (9) PRESENT POSTOFFICE OF FATHER Cheraw, S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 40 (Years)
 (12) BIRTHPLACE Richmond Co., D.C.
 (13) OCCUPATION Minister
 (14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Silvia Cassidy
 (15) PRESENT POSTOFFICE OF MOTHER Cheraw, S.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 32 (Years)
 (18) BIRTHPLACE Chesterfield Co., S.C.
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive, at 12:50 A.M.
 (Born alive or stillborn) (Hour A. M. or P. M.)
 on the date above stated.

(23) (Signature) D. S. Linderburg
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife
Physician Cheraw, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Feb 15, 1923 (28) D. S. Linderburg 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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