

(1) PLACE OF BIRTH

County of Newberry
 Township of F. L. 1st
 or
 the Town of
 or
 City of

CERTIFICATE OF BIRTH

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

No. for State Registrar Only
21957

Registration District No. 3443 Registered No. 3
 (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 Eda Mae Anderson (If child is not yet named, make supplemental report as directed)

(3) SEX OR GENDER girl (4) Type of Triplet To be answered only in event of Triplet or Triplet (5) Number in order of birth yes (6) Are Parents Married yes (7) DATE OF BIRTH July 9 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Perry Anderson

(9) PRESENT POSTOFFICE OF FATHER Silverstreet SC

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 23
 (Years)

(12) BIRTHPLACE Newberry Co

(13) OCCUPATION Farmer

(14) Number of children born to mother, including present birth 14

MOTHER.

(15) NAME BEFORE MARRIAGE Leola Long

(16) PRESENT POSTOFFICE OF MOTHER Silverstreet SC

(17) COLOR OR RACE Black (18) AGE AT LAST BIRTHDAY 21
 (Years)

(19) BIRTHPLACE Newberry

(20) OCCUPATION Farmer

(21) Number of children of this mother now living, including present birth 14

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 9 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. D. Deedes (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Silverstreet

Given name added from a supplemental report

(26) Witness Stella Deedes (Signature of Witness necessary only when question 22 is signed by mother)

(27) Filed July 11 1923 (28) J. Y. Floyd 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.