

WRITE PLAINLY. WITH ENFOLDING INC.—THIS IS A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1, THE OTHERS, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Newbury
Township of No. 4
OR
Inc. Town of Newbury
OR
City of Rt. 56

(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

File No. 19522 for State Registrar Only

Registration District No. 340 Registered No. 66
(For use of Local Registrar)

(2) Full Name of Child

Charles Brown

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? — (5) Number in order of birth — (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 26, 22
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Albert Brown

(9) PRESENT POSTOFFICE OF FATHER Newbury Rt. 56

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

(12) BIRTHPLACE Newbury Co.

(13) OCCUPATION Farmer

(14) Number of children born to mother, including present birth 2

MOTHER

(14) NAME BEFORE MARRIAGE Carrie Thomas

(15) PRESENT POSTOFFICE OF MOTHER Newbury Rt. 56

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 22
(Year)

(18) BIRTHPLACE Newbury Co.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 3 P. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Benjamin W. Wooten

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Newbury S.C.

Given name added from a supplemental report

(26) Witness — (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed July 10, 22 (28) R. M. S. Wooten 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.