

Form No. 1

(1) PLACE OF BIRTH

County of Marlboro.
 Township of Hebron
 OF
 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

460

Registration District No. 3304 Registered No. 21
 (For use of Local Registrar)

(2) Full Name of Child Dorise Townsend

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 Twin or Triplet 5. Number in order of birth 1 6. Are Parents Married? Yes 7. DATE OF BIRTH Feb 28, 1923
 Name of Month (Day) (Year)

FATHER.

8. FULL NAME John Townsend
 9. PRESENT POSTOFFICE OF FATHER Clifton
 10. COLOR OR RACE col 11. AGE AT LAST BIRTHDAY 33
 12. BIRTHPLACE SE
 13. OCCUPATION Farmer
 14. Number of children born to mother, including present birth 17

MOTHER.

14. NAME BEFORE MARRIAGE Minnie Nicholson
 15. PRESENT POSTOFFICE OF MOTHER Clifton
 16. COLOR OR RACE col 17. AGE AT LAST BIRTHDAY 26
 18. BIRTHPLACE SE
 19. OCCUPATION Laborer
 20. Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive or stillborn at 14 R. on the date above stated. How A. M. or P. M.)

(22) (Signature) Midwife S. S. S. S. S.
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife

Given name added from a supplemental report

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

(26) Date March 6, 1923 (27) Local Registrar W. H. Wood

*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.

MAKING UNLAWFUL BY THE BIDDING
 WRITE PLAINLY, WITH A SPACING, AND IN A PERMANENT INKED
 IN ONE OF THE CORNERS OF THE REPORT AND A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 FIRST-BORN, NO. 1, AND OTHERS, NO. 2, ETC., IN QUESTION 5
 Bureau of Columbia, Columbia, S. C.