

Form No. 1

(1) PLACE OF BIRTH

County of Gillon
 Township of Bellman
 or
 Inc. Town of Latta
 or
 City of Latta

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

3858

Registration District No. 46.26Registered No. 6
(For use of Local Registrar)

(No. St. Ward St.)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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

(6) Are Parents Married

yes

(7) DATE OF

BIRTH Jan. 4, 1923
(Month) (Day) (Year)

FATHER.

(8) FULL NAME

Weldon Moton

(9) PRESENT POSTOFFICE OF FATHER

Latta

(10) COLOR OR RACE

Colored(11) AGE AT LAST BIRTHDAY 26
(Years)

(12) BIRTHPLACE

Marlboro County, S.C.

(13) OCCUPATION

farming

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

2

MOTHER.

(14) NAME BEFORE MARRIAGE

Ester M. Queen

(15) PRESENT POSTOFFICE OF MOTHER

Latta

(16) COLOR OR RACE

Colored(17) AGE AT LAST BIRTHDAY 26
(Years)

(18) BIRTHPLACE

Marlboro County, S.C.

(19) OCCUPATION

farming

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

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature)

(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 23 is signed by mother)

(26) Date 2/27/23 (27) W. J. Rozen
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.