

Form No. 1.

(1) PLACE OF BIRTH **CERTIFICATE OF BIRTH**

County of Orangeburg STATE OF SOUTH CAROLINA.

Township of Edisto Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
50092

Inc. Town of Registration District No. 96030 Registered No. 7
(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. Essie Fraiser } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 27 1935
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wm. Fraiser

(9) PRESENT POSTOFFICE OF FATHER Cope

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 35 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Josie Shell

(15) PRESENT POSTOFFICE OF MOTHER Cope S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 33 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Hancy Dorely

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Cope 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 Feb 4 1935 (28) M. J. Manning 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.

MARGIN RESERVED FOR BINDING. 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 5. McCaw, of Columbia.