

MARGIN RESERVED FOR INDEXING

WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
 M. 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 1.  
 Bureau of Census, Columbia, S. C.

(1) PLACE OF BIRTH

County of Barrowfield  
 Township of Blackville  
 or  
 Inc. Town of.....  
 or  
 City of.....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

No. 10.—For State Registrar Only  
**31767**

Registration District No. 504 Registered No. 144  
 (For use of Local Registrar)  
 (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 Louella Wise

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

(3) SEX OR GEARL Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Age of Person Yes (7) DATE OF BIRTH Nov. 3, 1923  
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME Arthur Wise  
 (9) PRESENT POSTOFFICE OF FATHER Blackville  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 33  
 (12) BIRTHPLACE S. C.  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth 4

**MOTHER.**

(14) NAME BEFORE MARRIAGE Catherine Missus  
 (15) PRESENT POSTOFFICE OF MOTHER Blackville  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 33  
 (18) BIRTHPLACE S. C.  
 (19) OCCUPATION S. C.  
 (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 Alive on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
 (22) (Signature) Emilie B. Baker  
 (23) State whether Physician or Midwife Physician (24) Address of Physician or Midwife Blackville, S. C.

Given name added from a supplemental report  
 .....

(25) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (26) Filed Nov. 10, 1923 (27) W. H. H. H.

When there was no attending physician or midwife, then the father, householder, etc., should sign, if a child breathes even once, it must not be reported as stillborn. No report is required before the fifth month of pregnancy.