

(1) PLACE OF BIRTH

County of Sumter

Township of

or
Inc. Town ofor
City of Sumter

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

3. BOY OR GIRL Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are parents married? yes(7) DATE OF BIRTH March 23, 1922
(Name of Month) (Day) (Year)

FATHER.

8. FULL NAME George Washington Brown9. PRESENT POSTOFFICE OF FATHER Sumter10. COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 41
(Years)12. BIRTHPLACE Sumter Co13. OCCUPATION Machineist20. Number of children born to mother, including present birth five

MOTHER.

(14) NAME BEFORE MARRIAGE Addie Belvin(15) PRESENT POSTOFFICE OF MOTHER Sumter(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 39
(Years)(18) BIRTHPLACE Sumter Co(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 2:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. P. Osterman M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Sumter

Given name added from a supplemental report

(26) Witness

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

(27) Filed May 15, 1922(28) D. O. Brown

Local Registrar

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.

MARGINS RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN CASE OF DEATH, ALL MEMBERS OF A SEPARATE FAMILIES ARE TO BE QUESTIONED. IN CASE OF DEATH, ALL MEMBERS OF A SEPARATE FAMILIES ARE TO BE QUESTIONED.