

(1) PLACE OF BIRTH

County of Pickens

Township of

(or) Inc. Town of

(or) City of Liberty

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthRegistration District No. 3705

No. for State Registrar Only

5537Registered No. 47
(For use of Local Registrar)(2) Full Name of Child Charles Stanley Brooks

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

(3) BOY OR GIRL boy

(4) Twin or Triplet

(5) Number in order of birth
To be answered only in case of Twin or Triplet(6) Are Parents Married yes(7) DATE OF BIRTH 3-30-1913
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Stanley Brooks(9) PRESENT POSTOFFICE OF FATHER Liberty(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Year)(12) BIRTHPLACE Ind.(13) OCCUPATION Electrician(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Betty Hulstrop(15) PRESENT POSTOFFICE OF MOTHER Liberty(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Year)(18) BIRTHPLACE Pickens Co. S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) Hour 3:30 (M. or P. M.) on the date above stated.(23) (Signature) John T. Boyce

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Liberty

(Given name added from a supplemental report)

(26) Witness

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

(27) Filed June 9, 1913

(28)

John T. Boyce
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.

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U. S. B. - In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark FIRST-BORN, No. 1. THE OTHER, No. 2, etc. in question 1.

Bureau of Columbia, S. C.