

WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD, and mark the N. H.—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.

McGRAW HILL BOOK CO., NEW YORK, N. Y.

(1) PLACE OF BIRTH

County of LEXINGTON  
Township of GULL SWAMP  
or  
Inc. Town of.....  
or  
City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

31130

Registration District No. 3102

Registered No. 90  
(For use of Local Registrar)

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

(2) Full Name of Child

Hubert Brown

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 ✓ (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 8 22  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME Osceola Brown  
(9) PRESENT POSTOFFICE OF FATHER Swansea  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 50  
(Years)  
(12) BIRTHPLACE Livingston Co  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 6

MOTHER  
(14) NAME BEFORE MARRIAGE Viola Fellingner  
(15) PRESENT POSTOFFICE OF MOTHER Swansea  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36  
(Years)  
(18) BIRTHPLACE Alabama  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Celia Blanton  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Swansea

Given name added from a supplemental report Hubert

19.....  
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mother)  
(27) Filed Sept 20 1922 (28) 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.