

Form No. 1

(1) PLACE OF BIRTH

County of Anderson
 Township of Pendleton
 OF
 Inc. Town of
 OF
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

5871

Registration District No. 310Registered No. 24

(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 Ethel Geneva Brown

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

(3) BOY OR GIRL (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH Mar 18 23
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Dock Brown
 (9) PRESENT POSTOFFICE OF FATHER Pendleton
 (10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 24
 (Year) (12) BIRTHPLACE Anderson Co.
 (13) OCCUPATION farm hand
 (14) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Janie Douglas
 (15) PRESENT POSTOFFICE OF MOTHER Pendleton
 (16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY 24
 (Year) (18) BIRTHPLACE Anderson Co.
 (19) OCCUPATION farm hand
 (20) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(21) I hereby certify that I attended the birth of this child, who was Born alive at 4 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) Marthy Shear(23) State whether Physician or Midwife midwife(24) Address of Physician or Midwife Pendleton

Given name added from a supplemental report

(25) Witness

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

(26) Filed Apr 14 1923

(27)

N. H. Leavitt

(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 stillborns before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

Bureau of Columbia, Columbia, S. C.