

Form No. 1

## (1) PLACE OF BIRTH

County of Cherokee  
 Township of Concord  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

No. 1a.—For State Registrar Only  
**43065**

Registration District No. .... Registered No. 81  
 (For use of Local Registrar)

City of ..... (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 Esraja Green If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 20 (6) Are Parents Married? No (7) DATE OF BIRTH Oct 16 23  
 (Name of Month) (Day) (Year)

FATHER. (8) FULL NAME W. H. Green (14) NAME BEFORE MARRIAGE Esraja Green

(9) PRESENT POSTOFFICE OF FATHER Green (15) PRESENT POSTOFFICE OF MOTHER Green

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 42 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 42  
 (Year) (Year)

(12) BIRTHPLACE GA (18) BIRTHPLACE GA

(13) OCCUPATION Domestic (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 1 (21) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn at 9 A. M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Barney K. ... (24) Place whether Physician or Midwife Midwife (25) Address of Physician or Midwife ...

Given name added from a supplemental report (26) Witness M. H. ...  
 (Signature of Witness necessary only when question 23 is signed by mother)

(27) Filed 11/25 23 (28) ...  
 Registrar

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

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

Revised by Columbia, Columbia, S. C.