

## (1) PLACE OF BIRTH

County of Williamsburg  
 Township of Turkey

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  
26610

Registration District No. 4311 Registered No. 40

(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 Rachel Green

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

BOY OR GIRL?

girl

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twin or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

July 2 1923  
 (Name of Month) (Day) (Year)

## FATHER.

FULL NAME

Baxter Green

PRESENT POSTOFFICE OF FATHER

Kingstree SC

COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

38  
 (Years)

BIRTHPLACE

Williamsburg Co

OCCUPATION

Farmer

Number of children born to mother, including present birth

7

## MOTHER.

(14) NAME BEFORE MARRIAGE

Sarah Wallace

(15) PRESENT POSTOFFICE OF MOTHER

Kingstree SC

COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

35  
 (Years)

BIRTHPLACE

Williamsburg Co

OCCUPATION

House wife

(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 Alive at 4 A.M. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Jane Paul

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Kingstree Rt 1

P. M.  
 or P. M.)

Midwife

SC

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 28 is signed by mark)

(27) Filed July 7 1923

(28) S. H. Tindal  
 Local Registrar

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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