

Form No. 1

(1) PLACE OF BIRTH

County of ChesterTownship of Chester

Inc. Town of

City of

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

27682

Registration District No. 1107 Registered No. 138
(For use of Local Registrar)(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 Ruby Mae Brodeman If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sept 23, 1923</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME
J. E. Brodeman(9) PRESENT POSTOFFICE OF FATHER
Chester S.C.(10) COLOR OR RACE
white (11) AGE AT LAST BIRTHDAY
32
(Year)(12) BIRTHPLACE
Hanover Germany(13) OCCUPATION
mill worker(20) Number of children born to mother, including present birth
1

MOTHER.

(14) NAME BEFORE MARRIAGE
Missie Warty(15) PRESENT POSTOFFICE OF MOTHER
Chester S.C.(16) COLOR OR RACE
white (17) AGE AT LAST BIRTHDAY
28
(Year)(18) BIRTHPLACE
Fort Bend Co. Texas(19) OCCUPATION
housewife(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 alive at 7 a.m. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Pleasant X Heath
(24) State whether Physician or Midwife
midwife (25) Address of Physician or Midwife
Chester, S.C.

Given name added from a supplemental report

(26) Witness Pearl Good
(Signature of Witness necessary only when question 23 is signed by mother)(27) Filed Oct 9 1923 (28) Pleasant X Heath
Registrar 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.