

## (1) PLACE OF BIRTH

County of Indiguan  
 Township of Carrie  
 or  
 Inc. Town of .....

## CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

12901

Registration District No. 315 Registered No. 32  
 (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 Ola Masau Marehead child is not yet named, make supplemental report as directed

(3) SEX Girl (4) Twin or Triplet? No (5) Number in order of birth 5 (6) Are Parents Married? Yes (7) DATE OF BIRTH May 24 23  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Millage Marehead  
 (9) PRESENT POSTOFFICE OF FATHER Liberty, S.C. #1  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30  
 (12) BIRTHPLACE D.C.  
 (13) OCCUPATION Farming  
 (14) Number of children born to mother, including present birth 5

## MOTHER.

(15) NAME BEFORE MARRIAGE Bessie Harker  
 (16) PRESENT POSTOFFICE OF MOTHER Liberty, S.C. #1  
 (17) COLOR OR RACE Negro (18) AGE AT LAST BIRTHDAY 27  
 (19) BIRTHPLACE D.C.  
 (20) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 5 a. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. J. Smith(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Liberty, S.C. #1

Given name added from a supplemental report

(26) Witness J. L. Casey

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

(27) June 10 23

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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.