

(1) PLACE OF BIRTH

County of SavannahTownship of 2

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—for State Registrar Only

11903

Registration District No. 394 Registered No. 50

(For use of Local Registrar)

Full Name of Child Winneton Osbell

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

(1) BOY OR GIRL? <u>girl</u>	(2) Twin or Triplet? <u>no</u>	(3) Number in order of birth <u>1</u>	(4) Age at birth <u>yes</u> Months <u>0</u> Days <u>0</u>	(5) DATE OF BIRTH <u>Jan 25 1903</u> (Month) (Day) (Year)
FATHER			MOTHER	
(6) FULL NAME <u>John Broadus Osbell</u>			(10) NAME BEFORE MARRIAGE <u>Ela Simms</u>	
(7) PRESENT POSTOFFICE OF FATHER <u>Ridge Spring S.C.</u>			(11) PRESENT POSTOFFICE OF MOTHER <u>Ridge Spring S.C.</u>	
(8) COLOR OR RACE <u>white</u>			(12) COLOR OR RACE <u>white</u>	
(9) AGE AT LAST BIRTHDAY <u>27</u> (Years)			(13) AGE AT LAST BIRTHDAY <u>25</u> (Years)	
(14) BIRTHPLACE <u>Savannah Co.</u>			(15) BIRTHPLACE <u>Savannah Co.</u>	
(16) OCCUPATION <u>Farmer</u>			(17) OCCUPATION <u>Housewife</u>	
(18) Number of children born to mother, including present birth <u>1</u>			(19) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive on Jan 25 1903 at 10:50 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) D. B. Smith

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Phys Ridge Spring

Given name added from a supplemental report

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Registrar

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed May 4 1903 (28) May 4 1903 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.

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