

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
 M. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the  
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

Revised by Columbia, Columbia, S. C.

## (1) PLACE OF BIRTH

County of HamptonTownship of Brunson

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

4183

Registration District No. 2402 Registered No. 32

(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

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

 (3) BOY OR GIRL Boy (4) Twin or Triplet no (5) Number in order of birth one (6) Are Parents Married yes (7) DATE OF BIRTH Feb 25 1923  
 (Name of Month) (Day) (Year)  
 To be covered only in case of Twin or Triplet

## FATHER.

(8) FULL NAME addam Leadhall(9) PRESENT POSTOFFICE OF FATHER Brunson S.C.(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 26(12) BIRTHPLACE Hampton County(13) OCCUPATION Farming(14) Number of children born to mother, including present birth one

## MOTHER.

(14) NAME BEFORE MARRIAGE Lillie May Barnes(15) PRESENT POSTOFFICE OF MOTHER Brunson S.C.(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 19(18) BIRTHPLACE Hampton County(19) OCCUPATION Farming(20) Number of children of this mother now living, including present birth one

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was alive on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(24) (Signature) Lillie Miles (25) Address of Physician or Midwife Brunson S.C.

Given name added from a supplemental report

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

(27) Filed Feb 26 1923 (28) J. W. Rogers 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.