

(1) PLACE OF BIRTH

County of

Town of

City of

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

2) Full Name of Child

SEX OR  
REL

FATHER.

MOTHER.

PRESENT  
POST OFFICE  
OF FATHERCOLOR  
OR  
RACE

BIRTHPLACE

OCCUPATION

Number of children born to  
mother including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was

(23) (Signature)

(24) Whether Physician or Midwife

(25) Witness

(26) Local Registrar

(27) Date

(28) Date

(29) Date

(30) Date

(31) Date

(32) Date

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

30440

Registration District No. 4207

Registered No. 71

(For use of Local Registrar)

St. (For use of Local Registrar)

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

1) SEX OR  
REL

FATHER.

MOTHER.

PRESENT  
POST OFFICE  
OF FATHERCOLOR  
OR  
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(36) Date

(37) Date

(38) Date

(39) Date

(40) Date

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(84) Date

(85) Date

(86) Date

(87) Date

(88) Date

(89) Date

(90) Date

(91) Date

(92) Date

(93) Date

(94) Date

(95) Date

(96) Date

(97) Date

(98) Date

(99) Date

(100) Date

State of South Carolina, )  
County of Union. )

Personally appeared before me J. H. Black, who being duly sworn  
says that he is the father of Carl Jeff Black, who was born September  
18, 1923. That a birth certificate is filed in the office of the  
Clerk of Court of Union County, South Carolina, for said birth, but  
the name of the child on said certificate is blank. Deponent states  
that the name of the child is Carl Jeff Black.

Sworn to before me this the  
15th day of February, 1941.

H. A. Lawson (L. S.)  
Notary Public for S. C.

J. H. Black