

Form No. 1

(1) PLACE OF BIRTH

County of North CarolinaTownship of NorthwesternInc. Town of NorthwesternCity of Northwestern

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. - For State Registrar Only

4577

Registration District No. 33 ARegistered No. 14
(For use of Local Registrar)(No. 106 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

Grace

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

1. BOY OR GIRL?

Girl

4. Twin or Triplet?

To be answered only in case of Twin or Triplet

5. Number in order of birth

6. Are Parents Married?

Yes

7. DATE OF BIRTH

Feb 7, 1923
(Name (Month) (Day) (Year))

FATHER.

8. FULL NAME

Augustus J. Kennedy

9. PRESENT POSTOFFICE OF FATHER

Summerville

10. COLOR OR RACE

Colored

11. AGE AT LAST BIRTHDAY

24

12. BIRTHPLACE

Summerville, S.C.

13. OCCUPATION

Teacher

14. Number of children born to mother, including present birth

4

MOTHER.

14. NAME BEFORE MARRIAGE

Grace J. Brown

15. PRESENT POSTOFFICE OF MOTHER

Summerville

16. COLOR OR RACE

Colored

17. AGE AT LAST BIRTHDAY

31

18. BIRTHPLACE

Summerville

19. OCCUPATION

Housewife

20. Number of children of this mother now living, including present birth

7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at Summerville, S.C. on the date above stated.
Born alive or stillborn Hour A. M. or P. M.(23) (Signature) William J. Kennedy

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Summerville

Give name added from a supplemental report

(26) Witness

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

(27) Date

Feb 8, 1923

(28)

W. J. Kennedy

Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child becomes over due, it must be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.