(1) PLACE OF BIRTH

County of Greenwood

Township of .....

or

Inc. Town of .....

or

City of Greenwood (No. 407 Reynolds St.; ..... Ward)

(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: 28673

Registration District No. 23a Registered No. 128
(For use of Local Registrar)

(2) Full Name of Child Jesse Abner Long — If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL: Boy

(4) Twin or Triplet? No — To be answered only in event of Twins or Triplets

(5) Number in order of birth: 2

(6) Are Parents Married? Yes

(7) DATE OF BIRTH: Sept 9 1923 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME: Negro Long

(9) PRESENT POSTOFFICE OF FATHER: Greenwood SC

(10) COLOR OR RACE: Ne

(11) AGE AT LAST BIRTHDAY: 21 (Years)

(12) BIRTHPLACE: Telzer SC

(13) OCCUPATION: Grocer

(14) Number of children born to mother, including present birth: Two

MOTHER.

(14) NAME BEFORE MARRIAGE: Vera Steele

(15) PRESENT POSTOFFICE OF MOTHER: Greenwood SC

(16) COLOR OR RACE: Ne

(17) AGE AT LAST BIRTHDAY: 19 (Years)

(18) BIRTHPLACE: Savanah Ga

(19) OCCUPATION: Domestic

(21) Number of children of this mother now living, including present birth: Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4:30 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. L. Moskay

(24) State whether Physician or Midwife: Phys

(25) Address of Physician or Midwife: Greenwood SC

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed Oct 9 1923 (28) Mauthemmen
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.

*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.