

MARGIN RESERVE FOR BINDING.
WHITE PLAINS. WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN. No 1 'TIRE OTHER No 2, etc. in question 5

(1) PLACE OF BIRTH

County of Sumter, S.C.
Township of
OR
Inc. Town of
OR
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 Alex Brody

File No.—For State Registrar Only
20285

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

Registration District No. 41A Registered No. 96
(For use of Local Registrar)

(No. Tronney Hospital St.; Ward)

3) SEX OR CHILD Boy 4) Twin or Triplet? ☒ 5) Number in order of birth 10 6) Are Parents Married? Yes 7) DATE OF BIRTH March 16, 1922
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Hyman Brody
9) PRESENT POSTOFFICE OF FATHER Sumter, S.C.
10) COLOR OR RACE Jew 11) AGE AT LAST BIRTHDAY 47 (Years)
12) BIRTHPLACE Russia
13) OCCUPATION Shoe-maker
20) Number of children born to mother, including present birth 10

MOTHER.

14) NAME BEFORE MARRIAGE Bessie Fish
15) PRESENT POSTOFFICE OF MOTHER Sumter, S.C.
16) COLOR OR RACE Jew 17) AGE AT LAST BIRTHDAY 41 (Years)
18) BIRTHPLACE Russia
19) OCCUPATION House-work
21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) H. A. Meece
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed July 10, 1922 (28) H. A. Meece 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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