

(1) PLACE OF BIRTH

County of BeaufortTownship of King

Inc. Town of

City of

(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

64125

Registration District No. 12-03 Registered No. 61

(For use of Local Registrar)

(2) Full Name of Child Isaac Brown If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Boy (4) Twin or Triplet? Yes (5) Number in order of birth 7 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 10 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jesse Brown(9) PRESENT POSTOFFICE OF FATHER St George S.C.(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 28 (Years)(12) BIRTHPLACE St George S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Minnie May(15) PRESENT POSTOFFICE OF MOTHER St George S.C.(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 26 (Years)(18) BIRTHPLACE St George S.C.(19) OCCUPATION Farmer Wife(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 Alive at 6 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Dr. J. B. S. C. Schuster

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

191...

Registrar

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

(27) Filed July 1 1916 (28) C. H. Appleby 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.

MARGIN RESERVED FOR BINDING. 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. THE OTHER, No. 2, etc., in question 5. McChaw, of Columbia.