

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PREPARATION SUBMITTED TO THE STATE REGISTER FOR RECORDING. IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THIS OFFICE, No. 2, etc., in question 8.

(1) PLACE OF BIRTH
 County of York
 Township of Lawson
 or
 Inc. Town of
 or
 City of (No. 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
66594

Registration District No. 43.05 Registered No. 44
 (For use of Local Registrar)

(2) Full Name of Child Julius M. Brown
 (If child is not yet named, make supplemental report as directed.)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>2</u>	(6) Sex <u>Female</u>	(7) DATE OF BIRTH <u>June 14, 1916</u> (Name of Month) (Day) (Year)
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FATHER.		MOTHER.	
(8) FULL NAME <u>Tom Mart Brown</u>	(10) NAME BEFORE MARRIAGE <u>Line Ella Matthews</u>	(14) PRESENT POSTOFFICE OF FATHER <u>Tines</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Tines</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Tines</u>	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>27</u>	(18) COLOR OR RACE <u>White</u>
(10) COLOR OR RACE <u>White</u>	(19) BIRTHPLACE <u>Tines</u>	(20) OCCUPATION <u>Carpenter</u>	(21) BIRTHPLACE <u>Manning</u>
(11) AGE AT LAST BIRTHDAY <u>43</u>	(22) OCCUPATION <u>Housewife</u>	(23) Number of children born to mother, including present birth <u>2</u>	(24) Number of children of this mother now living, including present birth <u>2</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(25) I hereby certify that I attended the birth of this child, who was White at 6 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(26) Signature
Kearney Cadman

(27) State whether Physician or Midwife
Midwife

(28) Address of Physician or Midwife
Tines

Given name added from a supplemental report

(29) Witness
June 15th 1916

(30) Signature
L. Baggett

(31) Date
June 15th 1916

(32) Signature
L. Baggett

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.

Albert R. Mosely, Local Registrar