

## (1) PLACE OF BIRTH

County of Union

Township of .....

In. Town of .....

City of Union

(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

30404

Registration District No. 42-A Registered No. 149  
(For use of Local Registrar)City of Union (No. Piney St. 1 Ward 1)(2) Full Name of Child P. W. Flaxie If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy (4) Twin or triplet? No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Sept. 28, 28  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Clark Flaxie(9) PRESENT POSTOFFICE OF FATHER Union SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26  
(Years)(12) BIRTHPLACE Union Co.(13) OCCUPATION Mill work(14) Number of children born to mother, including present birth One

## MOTHER.

(14) NAME BEFORE MARRIAGE Lillian Bruner(15) PRESENT POSTOFFICE OF MOTHER Union SC(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 17  
(Years)(18) BIRTHPLACE Spaulding Co.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth One

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive (Born alive or stillborn) (Hour A. M. or P. M.) 1:45 P. M.  
on the date above stated.(23) (Signature) [Signature](24) State whether Physician or Midwife: Physician (25) Address of Physician or Midwife: Union SC

Given name added from a supplemental report

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

(27) Filed 10-10-23 (28) [Signature] 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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