

## (1) PLACE OF BIRTH

County of Wm. Burg.  
 Township of Hwy.  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—for State Registrar Only

30485

Registration District No. 4302 Registered No. 417  
 (For use of Local Registrar)

(No. .... St. .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Proctor Wilson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet To be answered only in event of Twin or Triplet (5) Are Parents Married? Yes (6) DATE OF BIRTH Sept 18 1923  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Sam Wilson  
 (9) PRESENT POSTOFFICE OF FATHER Wilmington, S.C.  
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 35  
 (Year) (12) BIRTHPLACE Wilmington, S.C.  
 (13) OCCUPATION Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE Shirley Brown  
 (15) PRESENT POSTOFFICE OF MOTHER Wilmington, S.C.  
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 30  
 (Year) (18) BIRTHPLACE Wilmington, S.C.  
 (19) OCCUPATION Housekeeper

(20) Number of children born to mother, including present birth 19

(21) Number of children of this mother now living, including present birth 19

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Proctor Wilson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Wilmington, S.C.

Given name added from a supplemental report

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

(27) Filed Sept 20 1923 (28) B. L. G. Larkins  
 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.