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P.M.,
P.M.)
Wife
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1. PLACE OF BIRTH

CERTIFICATE OF BIRTH

FILE No.—For State Registrar Only

County of Colleton
Township of Glover
or
Inc. Town of _____
or
City of _____

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

910-a no

Registration District No. 1406 Registered No. _____
(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

Carl Blake

{ If child is not yet named, make supplemental report as directed.

3. BOY OR GIRL

4. Twin or Triplet?

5. Number in order of birth

6. Are Parents Married?

DATE OF BIRTH

Boy

To be answered only in event of Twins or Triplets

Yes

Jan 11 1922
(Name of Month) (Day) (Year)

8. FULL NAME

FATHER
Robert Blake

14. NAME BEFORE MARRIAGE

MOTHER
Bertude Christian

9. PRESENT POSTOFFICE OF FATHER

Round O. SC

15. PRESENT POSTOFFICE OF MOTHER

Round O. SC

10. COLOR OR RACE

Colored

11. AGE AT LAST BIRTHDAY (Years)

16. COLOR OR RACE

Colored

17. AGE AT LAST BIRTHDAY (Years)

12. BIRTHPLACE

SC

18. BIRTHPLACE

SC

13. OCCUPATION

Farmer

19. OCCUPATION

Domestic

20. Number of children born to mother, including present birth

21. Number of children of this mother now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

23. Signature

Flora Green Hudock

24. State whether Physician or Midwife

25. Degree of Physician or Midwife

Physician

Given name added from a supplemental report

_____, 192____

Registrar

26. Witness

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

27. Filed

Nov 1 1932

28.

P. S. Skuman
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.