

(1) PLACE OF BIRTH

County of *Wilmington*Township of *Hope*

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

22854

Registration District No. *4501*Registered No. *80*
(For use of Local Registrar)(2) Full Name of Child *Martha Belle Casley*

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

3) BOY OR GIRL <i>Girl</i>	4) Twin or Triplet? To be answered only in case of Twin or Triplet	5) Number in order of birth	6) Are Parents Married? <i>Yes</i>	7) DATE OF BIRTH (Name of Month) (Day) (Year) <i>July 31 23</i>
FATHER			MOTHER	
8) FULL NAME <i>Jessie Casley</i>	14) NAME BEFORE MARRIAGE <i>Allie Bradshaw</i>			
9) PRESENT POSTOFFICE OF FATHER <i>Greenville SC</i>	15) PRESENT POSTOFFICE OF MOTHER <i>Greenville SC</i>			
10) COLOR OR RACE <i>Negro</i>	11) AGE AT LAST BIRTHDAY (Year) <i>69</i>	16) COLOR OR RACE <i>Negro</i>	17) AGE AT LAST BIRTHDAY (Year) <i>42</i>	
12) BIRTHPLACE <i>SC</i>		18) BIRTHPLACE <i>SC</i>		
13) OCCUPATION <i>Preacher</i>		19) OCCUPATION <i>Housewife</i>		
20) Number of children born to mother, including present birth <i>10</i>	21) Number of children of this mother now living, including present birth <i>10</i>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was *Born alive* at *J. A. ...*
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *Eunice White*

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife
Greenville SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed *Aug 6 23*

(28)

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.