

## (1) PLACE OF BIRTH

County of Charleston, S.C.  
 Township of .....  
 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

23953

Registration District No. 1203 Registered No. 1020  
 (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 Walter E. Brock (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet ..... (5) Number in order of birth ..... (6) Age Parents Married yes (7) DATE OF BIRTH Aug 17 1923  
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

(8) FULL NAME FATHER S. K. Brock (14) NAME BEFORE MARRIAGE MOTHER Ella B. Lick

(9) PRESENT POSTOFFICE OF FATHER Charleston S.C. R. (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C. R-1

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 43 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 28  
 (Year) (Year)

(12) BIRTHPLACE SC (18) BIRTHPLACE NC

(13) OCCUPATION Farmer (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 1 (21) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Wm. E. Lerner (24) State whether Physician or Midwife mid (25) Address of Physician or Midwife Charleston S.C. R-1

Given name added from a supplemental report

Janie Lacey  
Dec 18 1923  
 Registrar

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

(27) Filed 2/1 1923 (28) M. S. Waters  
 Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make the 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.

Bureau of Columbia, Columbia, S. C. Form No. 1, 1923, No. 2, etc., 12 questions