

## (1) PLACE OF BIRTH

County of UnionTownship of JonesvilleOR  
Inc. Town of JonesvilleOR  
City of Jonesville

(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

92103

Registration District No. 4204Registered No. 90

(For use of Local Registrar)

(2) Full Name of Child Doris Brown

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

(3) ~~Boy~~ OR  
GIRL?(4) Twin  
or Triplet? L(5) Number in  
order of birth L(6) Are  
Parents  
Married? Yes(7) DATE OF Dec. 5 19 6  
BIRTH (Name of Month) (Day) (Year)

## FATHER.

(8) FULL  
NAME James Fardie Brown(9) PRESENT  
POSTOFFICE  
OF FATHER Jonesville, SC.(10) COLOR  
OR  
RACE W (11) AGE AT LAST  
BIRTHDAY 22  
(Years)(12) BIRTHPLACE  
Madison Co. U.C.(13) OCCUPATION  
Truck Driver, Worker(20) Number of children born to  
mother, including present birth 2

## MOTHER.

(14) NAME BEFORE  
MARRIAGE Pearl Couter(15) PRESENT  
POSTOFFICE  
OF MOTHER Jonesville, SC.(16) COLOR  
OR  
RACE W (17) AGE AT LAST  
BIRTHDAY 26  
(Years)(18) BIRTHPLACE  
Union Co. S.C.(19) OCCUPATION  
Domestic(21) Number of children of this mother  
now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 5:00 P. M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Herbert T. Haines(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Union Co. S.C.Given name added from a supplement  
report

, 191

, 191

Registrar

(26) Witness

(Signature of Witness necessary only  
when question 23 is signed by mark)(27) Filed Dec 5 191 (28) C. N. Alexander  
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.

before the fifth month of pregnancy.