

MALE OR FEMALE?—SEE FOUR HUNDRED. WITH PLACENT, WITH UNFADING EYE—THIS IS A PRISON ARREST. MARK THE DATE OF BIRTH OF THIS CHILD. IN QUARTER 1. MARK THE DATE OF BIRTH OF THIS CHILD. IN QUARTER 1. MARK THE DATE OF BIRTH OF THIS CHILD. IN QUARTER 1.

(1) PLACE OF BIRTH
County of Beaufort
Township of St. Helena
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
3209

Registration District No. 604 Registered No. 19
(For use of Local Registrar)

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

(1) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 4, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Brown
(9) PRESENT POSTOFFICE OF FATHER Frogmore SC
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE South Carolina
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 15

MOTHER.

(14) NAME BEFORE MARRIAGE Lurena Legan
(15) PRESENT POSTOFFICE OF MOTHER Frogmore SC
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 30 (Years)
(18) BIRTHPLACE South Carolina
(19) OCCUPATION Farmer
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive at 10:10 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) Susan Green X Frogmore B.C.
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report:
(26) Witness Nurse King (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 1922 (28) J. J. Thomas 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.