

(1) PLACE OF BIRTH

County of Florence
Township of Jefferson
OR
Inc. Town of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

42374

Registration District No. M.07 Registered No. 71
(For use of Local Registrar)

City of (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 Edis Brown { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? — (5) Number in order of birth — (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 13 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Otis Brown

(9) PRESENT POSTOFFICE OF FATHER Florence, S.C.

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30
(Years)

(12) BIRTHPLACE Florence, S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth Three (3)

MOTHER.
(14) NAME BEFORE MARRIAGE Maggie Pison

(15) PRESENT POSTOFFICE OF MOTHER Florence, S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 27
(Years)

(18) BIRTHPLACE Florence, S.C.

(19) OCCUPATION Womens work on farm

(21) Number of children of this mother now living, including present birth Three (3)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 1 P. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. J. Cannon

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Med. S. Cannon

Given name added from a supplemental report

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

(27) Filed 1/10 19 23 (28) J. H. Cannon
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.