

Form No. 1

(1) PLACE OF BIRTH

County of Orangeburg
 Township of Middle
 Inc. Town of
 City of

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

File No.—For State Registrar Only

18770

Registration District No. 3620 Registered No. 52
 (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 Carrie Rush 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 June 7, 1923
 To be answered only in event of Twin or Triplet (Age of Mother) (Day) (Year)

FATHER.

(8) FULL NAME Dave Rush
 (9) PRESENT POSTOFFICE OF FATHER Bowman, S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 23 (Year)
 (12) BIRTHPLACE Orangeburg Co.
 (13) OCCUPATION Farmer Laborer
 (14) Number of children born to mother, including present birth Two

MOTHER.

(14) NAME BEFORE MARRIAGE Lula Robinson
 (15) PRESENT POSTOFFICE OF MOTHER Bowman, S.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 21 (Year)
 (18) BIRTHPLACE Orangeburg Co.
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was Born alive at 2 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sophy Berry(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Bowman, S.C.

Given name added from a supplemental report

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

(27) Filed 7-9 1923 (28) W.H. Dukes 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.