

Form No. 1

(1) PLACE OF BIRTH

County of Lancaster
 Township of Hampton
 or
 Inc. Town of.....
 or
 City of..... (No. St.; Ward)

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

File No.—For State Registrar Only
21659

Registration District No. 2902 Registered No. 59
 (For use of Local Registrar)

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married <u>Yes</u>	(7) DATE OF BIRTH <u>July 23, 23</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Henry Robin

(9) PRESENT POSTOFFICE OF FATHER Clinton S.C.

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 38
(Year)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farm laborer

(20) Number of children born to mother, including present birth 10

MOTHER.

(14) NAME BEFORE MARRIAGE Lula Glenn

(15) PRESENT POSTOFFICE OF MOTHER Clinton S.C.

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 31
(Year)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Farm

(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Ella X Golden

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Clinton S.C.

Given name added from a supplemental report

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Registrar

(26) Witness J. L. W. Bailey
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed July 30, 23 (28) J. L. W. Bailey
 Local Registrar

*When there was no attending physician or midwife, 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.

H. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD. See Section 146 of Code. Columbia, S. C. FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 4