

1. PLACE OF BIRTH

County of Barnwell
 Township of Great Cypress
 or
 Inc. Town of Kline
 or
 City of _____

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

FILE No.—For State Registrar Only
43685

Registration District No. 508 Registered No. 9
 (For use of Local Registrar)

(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 Willie Lee Bradley (If child is not yet named, make supplemental report as directed.)

3. SEX OR SEX	4. Twin or Triplet?	5. Number in order of birth	6. Are Parents Married? <u>yes</u>	7. DATE OF BIRTH <u>September 6</u> (Month of Month) (Day) (Year) <u>1923</u>
To be answered only in event of Twins or Triplets				

FATHER

8. FULL
NAME Money Bradley
 9. PRESENT
POSTOFFICE
OF FATHER Kline S.C.
 10. COLOR
OR
RACE Negro
 11. AGE AT LAST
BIRTHDAY 26
(Years)
 12. BIRTHPLACE Barnwell Co
 13. OCCUPATION Farmer
 20. Number of children born to
mother, including present birth 4

MOTHER

14. NAME BEFORE
MARRIAGE Anna Jones
 15. PRESENT
POSTOFFICE
OF MOTHER Kline S.C.
 16. COLOR
OR
RACE Negro
 17. AGE AT LAST
BIRTHDAY 23
(Years)
 18. BIRTHPLACE Barnwell Co
 19. OCCUPATION Housewife
 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 4 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

23. Signature Anice her Razon
midwife Kline, S.C.
 24. State whether Physician or Midwife 25. Address of Physician or Midwife

Given name added from a supplemental report

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

27. Filed Feb 9, 1924 28. Mrs. Kate Wingo
 Registrar 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.