

RESERVED FOR BINDING USE. WITH FADING INK—THIS IS A PERMANENT RECORD.

IN CASE OF TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc. in question 2.

(1) PLACE OF BIRTH

County of Richland

Township of Lykes Land

or  
Inc. Town of

or  
City of

(If birth occurs in a hospital or other institution give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

37418

Registered No. 2

(For use of Local Registrar)

2) Full Name of Child William Flowers

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy

(4) Twin or Triplet? X

(5) Number in order of birth

To be marked only in case of twins or triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Nov 1 93

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Dil Flowers

(9) PRESENT POSTOFFICE OF FATHER

Lykes Land, S.C.

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

49

(Years)

(12) BIRTHPLACE

Lykes Land, S.C.

(13) OCCUPATION

Farmer

(14) NAME BEFORE MARRIAGE

Ide Taylor

(15) PRESENT POSTOFFICE OF MOTHER

Lykes Land

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

37

(Years)

(18) BIRTHPLACE

Lykes Land

(19) OCCUPATION

House work

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

7

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 6 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Harriet Rachel Wright

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Rt 4, Col. S.C.

(26) Given name added from a supplemental report

101....

(27) Witness

H. Hall

(Signature of Witness necessary only when question 22 is signed or marked)

(28) Filed Nov. 16, 1923

(29) G. D. Sloan

State 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.

If a child breathes even once, it must not be reported as stillborn before the return.

If as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.