

(1) PLACE OF BIRTH

County of Pullman
 Township of Hillsboro
 or
 Inc. Town of.....
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
39951

Registration District No. 1613 Registered No. 154
 (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 Dawley Page If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 23, 23
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Dawley Page</u>	(14) NAME BEFORE MARRIAGE <u>Elva Davis</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Fork SC</u>	(18) PRESENT POSTOFFICE OF MOTHER <u>Fork SC</u>
(10) COLOR OR RACE <u>colored</u>	(11) AGE AT LAST BIRTHDAY <u>28</u>	(16) COLOR OR RACE <u>colored</u>	(17) AGE AT LAST BIRTHDAY <u>21</u>
(12) BIRTHPLACE <u>SC</u>	(13) OCCUPATION <u>Farmer</u>	(15) BIRTHPLACE <u>SC</u>	(19) OCCUPATION <u>field work</u>
(20) Number of children born to mother, including present birth <u>4</u>	(21) Number of children of this mother now living, including present birth <u>4</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alma at 8 a. m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed Dec 23, 1923 (28) N. N. N. N. 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.