

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH 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 1.

Form No. 5

(1) PLACE OF BIRTH
 County of Richland
 Township of
 or
 Inc. Town of Columbia
 or
 City of
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 Registration District No. 38B Registered No. 282
 (For use of Local Registrar)
 (No. 2626 Taylor St. Ward)
 (2) Full Name of Child Fred B. Brazell (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) Sex Parents married? <u>yes</u>	7) DATE OF BIRTH <u>Nov. 12, 23</u> (Name) (Month) (Day) (Year)
FATHER.		MOTHER.		
8) FULL NAME <u>F. J. Brazell</u>	10) NAME BEFORE MARRIAGE <u>Minnie Brazell</u>			
9) PRESENT POSTOFFICE OF FATHER <u>Edge wood. P.C.</u>	10) PRESENT POSTOFFICE OF MOTHER <u>Edge wood. P.C.</u>			
10) COLOR OR RACE <u>white</u>	11) AGE AT LAST BIRTHDAY <u>43</u> (Year)	10) COLOR OR RACE <u>white</u>	11) AGE AT LAST BIRTHDAY <u>40</u> (Year)	
12) BIRTHPLACE <u>Columbia, S.C.</u>		12) BIRTHPLACE <u>Columbia, S.C.</u>		
13) OCCUPATION <u>Bookster</u>		13) OCCUPATION <u>Housekeeper</u>		
20) Number of children born to mother, including present birth <u>8</u>		21) Number of children of this mother now living, including present birth <u>7</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Chas. Barr midwife
 (24) State whether Physician or Midwife
 (25) Address of Physician or Midwife 31 Edmore Ave

Given name added from a supplemental report

(26) Witness
 (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Dec 4 23 (28) J. S. Sloan 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.

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