

(1) PLACE OF BIRTH

County of CalhounTownship of Caulan

Inc. Town of

City of

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

(2) Full Name of Child

Thaspa Brown

No. 1-For State Register Only

6093

Registration District No. S.O.I. Registered No. 16
(For use of Local Registrar)

(No. St.; Ward)

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

3. SEX OR
CHILD Boy4. Twin
or Triplet
To be answered only in case of Twin or Triplet5. Number in
order of birth6. For
Parents
Marking7. DATE OF
BIRTH Feb. 21, 23
(Name of Month) (Day) (Year)

FATHER.

8. FULL
NAME R. K. Brown9. PRESENT
POSTOFFICE
OF FATHER Thaddeus10. COLOR
OR
RACE Ches11. AGE AT LAST
BIRTHDAY 41
(Years)12. BIRTHPLACE La.

13. OCCUPATION

Ham hand14. Number of children born to
father, including present birth10

MOTHER.

15. NAME BEFORE
MARRIAGE Annice Thack16. PRESENT
POSTOFFICE
OF MOTHER Thaddeus17. COLOR
OR
RACE Ches18. AGE AT LAST
BIRTHDAY 36
(Years)19. BIRTHPLACE La.

20. OCCUPATION

Ham hand21. Number of children of this mother
and living, including present birth6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9. 11
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Carrie H. H. H.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Give name added from a physician
and report

Witness

(Signature of Witness necessary only
when question 22 is signed by mark)Mar 6, 23 S. H. H.
Local RegistrarWhen there was no child born, the attending physician, etc., should make this return.
If a child was born, the attending physician, etc., should make this return.When there was no child born, the attending physician, etc., should make this return.
If a child was born, the attending physician, etc., should make this return.WRITE PLAINLY. WITH SPACING. SEE—THIS IS A PERMANENT RECORD. USE A SEPARATE BLANK FOR EACH CHILD. AND MARK THE
H. B.—In case of TWIN OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD. No. 2, etc. In question 1
FIRST-BORN. No. 1. TAKE OTHER. No. 2, etc. In question 1

COUNTY OF CALHOUN, GEORGIA