

Form No 1.

(1) PLACE OF BIRTH

County of Florence

Township of Watts

Inc. Town of

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

42857

Registration District No. 2012 Registered No. 118

(For use of Local Registrar)

(2) Full Name of Child Garriss Rusk If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 29, 1915

FATHER John Rusk MOTHER Maudie M. Rusk

(8) FULL NAME John Rusk (14) NAME BEFORE MARRIAGE Maudie M. Rusk

(9) PRESENT POSTOFFICE OF FATHER Charlottesville (15) PRESENT POSTOFFICE OF MOTHER Charlottesville

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28

(12) BIRTHPLACE Flo. Co (18) BIRTHPLACE Lee Co

(13) OCCUPATION Farmer (19) OCCUPATION House wife

(20) Number of children born to mother, including present birth 1 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at the date above stated. (Born alive or stillborn) (M.D. or F.M.)

(23) (Signature) L. Hannah Baker

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

Midwife Charlottesville

(26) Witness J. B. Kelly (Signature of Witness necessary only when question 23 is signed by Mark)

(27) Filed Jan 1, 1916 (28) J. B. Kelly Local Registrar

Given name added from a supplemental report

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

MARGIN RESERVED FOR ENDING. WHITE PLAINED, WITH UNFADING INK—THIS IS A PERMANENT RECORD. N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN N. No. 1. THE OTHER, No. 2, etc., in question 5. Care of Columbia.

*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.