

(1) PLACE OF BIRTH

County of

Richland

Township of

Inc. Town of

City of

Columbia

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

(2) Full Name of Child Frank B. Green

File No.—For State Registrar Only

2357

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No.

Registered No.

(For use of Local Registrar)

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

Jan. 12, 1912

FATHER.

(8) FULL NAME

Wesley Brown

(9) PRESENT POSTOFFICE OF FATHER

Columbia

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

18

(Years)

(12) BIRTHPLACE

Common Labor.

(13) OCCUPATION

Columbia

MOTHER.

(14) NAME BEFORE MARRIAGE

Georgia Green

(15) PRESENT POSTOFFICE OF MOTHER

Columbia

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

15

(Years)

(18) BIRTHPLACE

Wellers Place River Road

(19) OCCUPATION

Laundress.

(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 1 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report:

(26) Witness

Louise W. Abbe

(Signature of Witness when question 23 is filled in)

(27) Filed

1912

(28)

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.