

(1) PLACE OF BIRTH

County of Washington
 Township of Security Hill
 or
 Inc. Town of

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

File No.—For State Registrar Only
17389

Registration District No. 1510 Registered No. 40
 (For use of Local Registrar)

City of (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 Cadence Beaty If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD <u>girl</u>	(4) Twin or Triplet To be answered only in event of Twin or Triplet	(5) Number in order of birth <u>30</u>	(6) AGE <u>30</u>	(7) DATE OF BIRTH <u>June 12 1923</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
(8) FULL NAME <u>Benjamin Beaty</u>		(14) NAME BEFORE MARRIAGE <u>Carry Bonafante</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Security Hill</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Security Hill</u>		
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>23</u>	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>22</u>	
(12) BIRTHPLACE <u>S.E.</u>		(18) BIRTHPLACE <u>S.E.</u>		
(13) OCCUPATION <u>Farmer</u>		(19) OCCUPATION <u>Farmer's mother</u>		
(20) Number of children born to mother, including present birth <u>2</u>		(21) Number of children of this mother now living, including present birth <u>2</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 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) See Keith
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Security Hill

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
June 14 1923 (27) Anderson 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.

K O D A K S A F E T