

(1) PLACE OF BIRTH

County of MarlboroTownship of Rich Bluffor
Inc. Town of.....

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 Mable GossNo. for State Register 33217Registered No. 179
(For use of Local Registrar)(3) Sex Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Date of birth Sept 8, 22
(Month) (Day) (Year)FATHER
(8) FULL NAME Cape Goss
(9) PRESENT POSTOFFICE OF FATHER Tatum SC
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30 (Year)
(12) BIRTHPLACE Marlboro Co SC
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1MOTHER
(14) NAME BEFORE MARRIAGE Ethel Leggett
(15) PRESENT POSTOFFICE OF MOTHER Tatum SC
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Year)
(18) BIRTHPLACE Marlboro Co SC
(19) OCCUPATION Domestic
(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 Born alive (Born alive or stillborn) (Hour A. M. or P. M.) 5:30 P.M.
on the date above stated.(23) (Signature) Hattie Thomas
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife McCall SC

Given name added from a supplemental report

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

(27) Filed Oct 16, 22 (28) Local Registrar J. N. Thach

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.