

Form No. 1

(1) PLACE OF BIRTH

County of *Aiken*Township of *Piedmont*

or

Inc. Town of

or

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

5864

Registration District No. *310*Registered No. *15*
(For use of Local Registrar)

(2) Full Name of Child

Clissie Lee Crumshaw

(3) SEX OF CHILD

Girl

(4) Twin or Triplet?

No

(5) Number in order of birth

1

(6) Age

2

(7) DATE OF BIRTH

2 22 23

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

A. H. Crumshaw

(9) PRESENT POSTOFFICE OF FATHER

Piedmont, S.C.

(10) COLOR OR RACE

W

(11) AGE AT LAST BIRTHDAY

39

(12) BIRTHPLACE

Aiken Co., S.C.

(13) OCCUPATION

Farming

(20) Number of children born to mother, including present birth

8

MOTHER.

(14) NAME BEFORE MARRIAGE

Vada Bloch

(15) PRESENT POSTOFFICE OF MOTHER

Piedmont, S.C.

(16) COLOR OR RACE

W

(17) AGE AT LAST BIRTHDAY

37

(18) BIRTHPLACE

Greenville Co., S.C.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *born* at *3:30 a* M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *C. C. Foster*

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Piedmont, S.C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed *Apr. 14 1923*(28) *H. W. Leavitt*19
Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborns before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

Bureau of Columbia, Columbia, S. C.