

(1) PLACE OF BIRTH

County of OrangeTownship of Orangeor
Inc. Town ofCity of Orange

(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

43941

Registration District No. 36a Registered No. 198

(For use of Local Registrar)

(2) Full Name of Child Anthony Victor Broyna If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy (4) Twin or Triplet? X (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 30 22
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Anthony Broyna</u>	(14) NAME BEFORE MARRIAGE <u>May Belle - Ritter</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Charleston SC</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Orangeburg SC 102 W Amelia St</u>
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>31</u> (Years)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>19</u> (Years)
(12) BIRTHPLACE <u>Mass -</u>	(18) BIRTHPLACE <u>Orangeburg SC</u>	(13) OCCUPATION <u>Police</u>	(19) OCCUPATION <u>Home wife</u>
(20) Number of children born to mother, including present birth <u>1st</u>	(21) Number of children of this mother now living, including present birth <u>1st</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 40 AM on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) H. P. Schuyler
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Orangeburg

Given name added from a supplemental report

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

(27) Filed Jan 3 1923 (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.

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