

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 mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

(1) PLACE OF BIRTH

County of Bamberg
Township of Bamberg
or
Inc. Town of.....
or
City of.....

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

File No.—for State Registrar Only
5919

Registration District No. 400 Registered No. —0
(For use of Local Registrar)
(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 Rosa Lee Chalmers (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet To be answered only in case of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Nov 20 1923</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Jugene Chalmers</u>			(14) NAME BEFORE MARRIAGE <u>Mary Jones</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Bamberg</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Bamberg</u>	
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>23</u> (Year)	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>27</u> (Year)	
(12) BIRTHPLACE <u>Bamberg N. C.</u>			(18) BIRTHPLACE <u>Bamberg</u>	
(13) OCCUPATION <u>Saw Mill Hand</u>			(19) OCCUPATION <u>Domestic</u>	
(20) Number of children born to mother, including present birth <u>4</u>			(21) Number of children of this mother now living, including present birth <u>7</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 3 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. M. Brant
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Bamberg

Given name added from a supplemental report
.....
.....
.....

(26) Witness
(Signature of Witness necessary only when question 22 is signed by mark)
(27) Filed 3/24 1923 (28) J. M. Brant 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.