Form No. 3

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No. 88956 — For State Registrar Only

(1) PLACE OF BIRTH
County of Chester
Township of Baton Rouge
or
Inc. Town of .....
or
City of ..... (No. ..... St.; ..... Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 1100 Registered No. 56
(For use of Local Registrar)

(2) Full Name of Child. John Brown
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
Boy	(To be answered only in event of Twins or Triplets)		Yes	Nov. 16, 1916 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME: Allace Brown	(14) NAME BEFORE MARRIAGE: Jemosa Sanders
(9) PRESENT POSTOFFICE OF FATHER: Lowryville #2	(15) PRESENT POSTOFFICE OF MOTHER: Lowryville, #2
(10) COLOR OR RACE: Colored (11) AGE AT LAST BIRTHDAY: 36 (Years)	(16) COLOR OR RACE: Colored (17) AGE AT LAST BIRTHDAY: 32 (Years)
(12) BIRTHPLACE: Chester Co.	(18) BIRTHPLACE: Chester Co
(13) OCCUPATION: Farming	(19) OCCUPATION: Farm Laborer
(20) Number of children born to mother, including present birth: 5	(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 alive (Born alive or stillborn) at 6 P. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Ellen Sanders

(24) State whether ~~Physician~~ or Midwife: Midwife

(25) Address of ~~Physician~~ or Midwife: Lowryville #2

Given name added from a supplemental report
....., 191....
..... Registrar

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

(27) Filed Dec. 16 1916 (28) J. A. Cornwell
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.