

Form No. 1

(1) PLACE OF BIRTH

County of Marble

Township of

or

Inc. Town of Marble

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

Registration District No. 19-2Registered No. 9
(For use of Local Registrar)

File No. — For State Registrar Only

3726

(2) Full Name of Child Albert

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

To be answered only in event of Twin or Triplet

Feb 9 1923
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

8) FULL NAME

(14) NAME BEFORE MARRIAGE

9) PRESENT POSTOFFICE OF FATHER

(15) PRESENT POSTOFFICE OF MOTHER

(10) COLOR OR RACE

(11) AGE AT LAST BIRTHDAY

(Years)

(16) COLOR OR RACE

(17) AGE AT LAST BIRTHDAY

(Years)

12) BIRTHPLACE

(18) BIRTHPLACE

13) OCCUPATION

(19) OCCUPATION

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

19 Registrar

(27) Filed

Feb 10 1923

(28)

J. M. Harvey

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.

THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. NO. 1. THE OTHER, NO. 2, ETC., IN QUESTION 3. BUREAU OF VITAL STATISTICS, COLUMBIA, S. C.