

(1) PLACE OF BIRTH

County of Beaufort...
 Township of Sheldon
 Inc. Town of
 or
 City of (No. St.; Ward)

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only
16805

Registration District No. 60.3A Registered No. 26.
 (For use of Local Registrar)

(2) Full Name of Child Isarina Klise If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL Girl (2) Twin or Triplet To be answered only in event of Twin or Triplet (3) Number in order of birth (4) Are Parents Married yes (5) DATE OF BIRTH June 9, 1923
 (Date of Month) (Day) (Year)

FATHER.			MOTHER.		
(6) FULL NAME	<u>Daniel Klise</u>		(14) NAME BEFORE MARRIAGE	<u>Maggie Williams</u>	
(8) PRESENT POSTOFFICE OF FATHER	<u>Dale S.C.</u>		(16) PRESENT POSTOFFICE OF MOTHER	<u>Dale S.C.</u>	
(10) COLOR OR RACE	<u>Black</u>	(11) AGE AT LAST BIRTHDAY <u>41</u> (Year)	(18) COLOR OR RACE	<u>Black</u>	(17) AGE AT LAST BIRTHDAY <u>38</u> (Year)
(12) BIRTHPLACE	<u>Beaufort Co., S.C.</u>		(19) BIRTHPLACE	<u>Beaufort Co., S.C.</u>	
(13) OCCUPATION	<u>Farmer</u>		(20) OCCUPATION	<u>House wife</u>	
(21) Number of children born to mother, including present birth	<u>12</u>		(22) Number of children of this mother now living, including present birth	<u>12</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(23) I hereby certify that I attended the birth of this child, who was ... born alive ... at 6:30 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(24) (Signature) Martha X Green
 (25) State whether Physician or Midwife midwife (26) Address of Physn. or Midwife Dale S.C.

Given name added from a supplemental report

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

(28) Filed June 12, 1923 (29) E. M. Mark
 Registrar 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.