

(1) PLACE OF BIRTH

County of Florence
 Township of Lake
 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

42405

Registration District No. 2009 Registered No. 141
 (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 Cornius Elizabeth Brown If child is not yet named, make supplemental report as directed.

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 7 27
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Marion Brown
 (9) PRESENT POSTOFFICE OF FATHER Leo SC RI
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29
 (Year)
 (12) BIRTHPLACE SC

(13) OCCUPATION

Farm Labor

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Lillis Eaddy
 (15) PRESENT POSTOFFICE OF MOTHER Leo SC RI
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 35
 (Year)
 (18) BIRTHPLACE SC

(19) OCCUPATION

Housewife

(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 born at 8 A M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Marian Singleton
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Leo SC RI

Given name added from a supplemental report

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

(27) Date 12/21 27 (28) R. L. Carter
 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.