

Form No. 1

(1) PLACE OF BIRTH

County of Jasper
 Township of Hopkinton
 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

4271

Registration District No. 2601 Registered No. 14
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet 2 (5) Number in order of birth 2 (6) Are Parents Married Yes (7) DATE OF BIRTH Feb. 23, 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Samuel Robinson(9) PRESENT POSTOFFICE OF FATHER Cosumetahia, S.C.(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 25
 (Year)(12) BIRTHPLACE South Carolina(13) OCCUPATION farmer(14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Gerena Ryons(15) PRESENT POSTOFFICE OF MOTHER Cosumetahia, S.C.(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 23
 (Year)(18) BIRTHPLACE South Carolina(19) OCCUPATION House wife(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Lucy Harrison
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Cosumetahia, S.C.

Given name added from a supplement-
 tal report

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

(27) Filed 2/28, 1923 (28) R. H. Roberts
 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.