

(1) PLACE OF BIRTH

County of BerkshireTownship of St. Stephensor
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

3263

Registration District No. 725 Registered No. 6
(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 Elvise Brown If child is not yet named, make supplemental report as directed3. BOY OR GIRL g. 4. Twin or Triplet? no 5. Number in order of birth 1 6. Are Parents Married? yes 7. DATE OF BIRTH Jan. 26, 1922
(Name of Month) (Day) (Year)

FATHER.

8. FULL NAME Henry Brown9. PRESENT POSTOFFICE OF FATHER St. Stephens10. COLOR OR RACE white 11. AGE AT LAST BIRTHDAY 39
(Year)12. BIRTHPLACE St. Stephens13. OCCUPATION Farming14. Number of children born to mother, including present birth 7

MOTHER.

14. NAME BEFORE MARRIAGE Jane Brinson15. PRESENT POSTOFFICE OF MOTHER St. Stephens16. COLOR OR RACE white 17. AGE AT LAST BIRTHDAY 39
(Year)18. BIRTHPLACE Boundin19. OCCUPATION Farm-wife20. 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 alive at 59 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Willie Wilson
(24) State whether Physician or Midwife (25) Address of Physician or Midwife St. Stephens

Given name added from a supplemental report

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

(27) Filed Feb. 25, 1922 (28) W. A. Felt Local RegistrarWhen 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.

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MARGEN RECOMMENDED FOR INDEXING

WHEN PLACING THIS IN A PERMANENT RECORD, WRITE PLAINLY THEREON ONE MEMORANDUM FOR EACH CHILD, AND MARK THE PLAIN-BOOK No. 1 THIS OFFICE, No. 2, etc. in question 5

Machine of Columns. Columns 6 & 7