

## (1) PLACE OF BIRTH

County of ChesterfieldTownship of Coast HouseInc. Town of Township

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

File No. - For State Registrar Only

17220

Registration District No. 1267Registered No. 79  
(For use of Local Registrar)(No. 1267 St. 1 Ward 1)(2) Full Name of Child Mary Agnes Webster 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 June 23, 1923  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Augustus Webster(9) PRESENT POSTOFFICE OF FATHER Ruby S. Co(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40 (Years)(12) BIRTHPLACE Chesterfield Coast House Township(13) OCCUPATION farmer(14) Number of children born to mother, including present birth 13

## MOTHER.

(14) NAME BEFORE MARRIAGE Orytha Sellers(15) PRESENT POSTOFFICE OF MOTHER Ruby S. Co(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34 (Years)(18) BIRTHPLACE Chesterfield Coast House Township(19) OCCUPATION farmer's wife(21) Number of children of this mother now living, including present birth 13

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 5 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Phillis Sellers(24) State whether Physician or Midwife Mid wife(25) Address of Physician or Midwife Ruby S. Co

(Given name added from a supplemental report)

(26) Witness .....

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

(27) Filed July 7, 1923 (28) M. S. Waters 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.