

(1) PLACE OF BIRTH

County of Aiken
 Township of Millbrook
 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
26869

Registration District No. 201Registered No. 88
(For use of Local Registrar)

City of (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 Fredy Blackmon If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet No (5) Number in order of birth 10 (6) Are Parents Married Yes (7) DATE OF BIRTH Sept 21, 23
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Dewdy Blackmon</u>	(14) NAME BEFORE MARRIAGE <u>Lillian B. Blackmon</u>	(10) PRESENT POSTOFFICE OF FATHER <u>Aiken S.C.</u>	(12) PRESENT POSTOFFICE OF MOTHER <u>Aiken S.C.</u>
(16) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>42</u> (Years)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>34</u> (Years)
(15) BIRTHPLACE <u>Aiken Co S.C.</u>	(15) BIRTHPLACE <u>Aiken Co S.C.</u>	(18) OCCUPATION <u>Farmer</u>	(18) OCCUPATION <u>Housewife</u>
(20) Number of children born to mother, including present birth <u>10</u>	(21) Number of children of this mother now living, including present birth <u>7</u>		

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) H. N. Collier
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Sept 25, 23 (28) F. H. Cook 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.