

Form No. 3

1) PLACE OF BIRTH

County of Washington  
 Township of Lanham  
 or  
 Town of .....  
 or  
 City of .....

CERTIFICATE OF BIRTH

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

No. for State Registrar Only

3590

Registration District No. 404

Registered No. 5  
 (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 Livid about 12 hours

If child is not yet named, make supplemental report as directed

BOY OR GIRL

(1) Twin or Triplet  
 To be answered only in event of Twin or Triplet

(2) Number in order of birth

(3) Are Parents Married?

(4) DATE OF BIRTH Feb. 18, 1923  
 (Name of Month) (Day) (Year)

FATHER

FULL NAME Becker Lucas

PRESENT POSTOFFICE OF FATHER Lanham

COLOR OR RACE col. (11) AGE AT LAST BIRTHDAY 30  
 (Year)

BIRTHPLACE SC

OCCUPATION Public Work

Number of children born to mother, including present birth 6

MOTHER

(14) NAME BEFORE MARRIAGE Bertha Jackson

(15) PRESENT POSTOFFICE OF MOTHER Lanham

(16) COLOR OR RACE col. (17) AGE AT LAST BIRTHDAY 29  
 (Year)

(18) BIRTHPLACE SC

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was live at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) W. C. Cooper

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Lanham

Name added from a supplemental report

(26) Witness

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

(27) Filed Feb 18-1923 (28) R. J. Chaplin  
 Local Registrar

If 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.

Star Only

4  
 (Star)

Ward

make directed

30  
 (Year)

son

30  
 (Year)

Ar. M.  
 (or P. M.)

W. C. Cooper

Midwife

W. C.

lin

return