

MARGIN RESERVED FOR INDEXING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 6.

(1) PLACE OF BIRTH

County of Aiken
 Township of Windsor
 Inc. Town of.....
 City of.....

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

File No. 30777

Registration District No. 245 Registered No. 54
 (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 R. E. Cushman (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Male (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Oct 19 28
 (Name of Month) (Day) (Year)

| FATHER. | | MOTHER. | |
|--|---|--|--|
| (8) FULL NAME <u>Rhaphus Cushman</u> | (14) NAME BEFORE MARRIAGE <u>Frances Green</u> | (10) PRESENT POSTOFFICE OF FATHER <u>Windsor</u> | (16) PRESENT POSTOFFICE OF MOTHER <u>Windsor</u> |
| (10) COLOR OR RACE <u>White</u> | (11) AGE AT LAST BIRTHDAY <u>26</u> | (18) COLOR OR RACE <u>White</u> | (17) AGE AT LAST BIRTHDAY <u>21</u> |
| (12) BIRTHPLACE <u>Aiken Co</u> | (15) OCCUPATION <u>Farmer</u> | (19) BIRTHPLACE <u>Aiken Co</u> | (18) OCCUPATION <u>Housework</u> |
| (20) Number of children born to mother, including present birth <u>2</u> | (21) Number of children of this mother now living, including present birth <u>2</u> | | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive (Born alive or stillborn) at 4 P. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Dr. Henry (24) Since whether Physician or Midwife Midwife (25) Address of Physician or Midwife Windsor

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) Dr. E. E. Cushman
 (27) Date Oct 20 28 (28) Local Registrar R. E. Cushman

*When the mother is not the father, householder, etc., should make this return. If a child is born stillborn, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.