

Form No. 1

(1) PLACE OF BIRTH

County of Aiken
 Township of Pokey Grove
 OF
 Inc. Town of
 OF
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

12616

Registration District No. 209 Registered No. 15
 (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 Marian Elizabeth Corbett child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? ☒ (5) Number in order of birth 4 (6) Are Parents Married? ☒ (7) DATE OF BIRTH May 28 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charlie Corbett
 (9) PRESENT POSTOFFICE OF FATHER Salley, S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 32
 (Year)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Rosalie Tendall
 (15) PRESENT POSTOFFICE OF MOTHER Salley, S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25
 (Year)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION House wife

(20) Number of children born to mother, including present birth 4

(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 1 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Charity X. Ryles

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

Given name added from a supplemental report

(26) Witness Chas. H. Salley
 (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 5/24 1923 (28) Chas. H. Salley
 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.

FIRST-BORN, No. 1 THE OTHER, No. 2, etc. In question 5