

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 2.

(1) PLACE OF BIRTH

County of Cherokee
 Township of Lewisville
 or
 Inc. Town of
 or
 City of

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

Registration District No. 110.6

File No.—For State Registrar Only

746

Registered No. 1.9
 (For use of Local Registrar)

(2) Full Name of Child Janice Walker

If 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

(6) Are Parents Married? yes

(7) DATE OF BIRTH

1.1. Jan. 19. 22
 (Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME

Port Walker

(9) PRESENT POSTOFFICE OF FATHER

Cherokee Co.

(10) COLOR OR RACE

colored

(11) AGE AT LAST BIRTHDAY

34
 (Years)

(12) BIRTHPLACE

Cherokee Co.

(13) OCCUPATION

farmer

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

1. 7. 1

MOTHER.

(14) NAME BEFORE MARRIAGE

Janice Henderson

(15) PRESENT POSTOFFICE OF MOTHER

Cherokee Co.

(16) COLOR OR RACE

colored

(17) AGE AT LAST BIRTHDAY

25
 (Years)

(18) BIRTHPLACE

Cherokee Co.

(19) OCCUPATION

farmer's wife

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

1. 7. 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was... alive... at 7. 1. 22... on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Ellen Drayton

(24) State whether Physician or Midwife

midwife

(25) Address of Physician or Midwife

Cherokee Co. S.C. R.H.S.

Given name added from a supplemental report

(26) Witness

W. J. Nalley
 when question 23 is signed by mark

(27) Filed

Jan 31 1922

(28) Local Registrar

W. J. Nalley

*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.