

MAKE SEPARATE BLANKS FOR EACH CHILD, and mark the
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Williamsburg
 Township of Jehou
 or
 Inc. Town of

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

File No. — For State Registrar Only
17062

Registration District No. 9309 Registered No. 51
 (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 Baby Thomas

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? no (7) DATE OF BIRTH Jan 25 1922
To be answered only in event of Twins or Triplets (Specify of Month) (Day) (Year)

FATHER.

(8) FULL NAME Samel Thomas
 (9) PRESENT POSTOFFICE OF FATHER Hampton P.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 22
(Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Luisa Bell
 (15) PRESENT POSTOFFICE OF MOTHER Hampton P.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 11
(Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Tom's hand
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Wm. S. Cook
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Hampton P.C.

Given name added from a supplemental report

(26) Witness Lattie Bell
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 2-20-22 (28) H. K. Cook
 Registrar 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.