

Form No. 8

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

FILE NO. For State Registrar Only

5893

County of Anderson

Township of _____

or

Inc. Town of Waverly

or

City of _____

Registration District No. 314Registered No. 12

(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

Boris May Jones

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? _____

(7) DATE OF BIRTH

3/211923

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Frank Jones

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE

B.

(11) AGE AT LAST BIRTHDAY

23
(Years)

(12) BIRTHPLACE

Anderson S.C.

(13) OCCUPATION

Hammer

MOTHER

(14) NAME BEFORE MARRIAGE

Matilda S.

(15) PRESENT POSTOFFICE OF MOTHER

Wallerstoe S.C.

(16) COLOR OR RACE

B.

(17) AGE AT LAST BIRTHDAY

24
(Years)

(18) BIRTHPLACE

(19) OCCUPATION

(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 born at 2 A.M. on the date above stated.
(born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Matilda S.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

April 101923Matilda S.
Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborn before the first month of pregnancy.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark "1" FIRST-BORN, "2" THE OTHER, "3" etc., in question 1.