

WRITED PLAINLY, WITH UNFADING INK—THIS IS A PRECISEMENT REQUIREMENT. N. B.—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 5.

(1) PLACE OF BIRTH

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

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

File No.—For State Registrar Only
33130

Registration District No. 400 Registered No. 177
 (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 Willie James Carson (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 30 1922
 (Name of Month) (Day) (Year)

FATHER (8) FULL NAME Wm. Carson MOTHER (14) NAME BEFORE MARRIAGE Elias Jenkins

(9) PRESENT POSTOFFICE OF FATHER (15) PRESENT POSTOFFICE OF MOTHER

(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 23 (16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 19
 (Years) (Years)

(12) BIRTHPLACE (18) BIRTHPLACE

(13) OCCUPATION Barman (19) OCCUPATION

(20) Number of children born to mother, including present birth 1 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 11 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Edith Brown (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 mark)

(27) Filed 11/4 1922 (28) John Carson 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.

MEGAW OF COLUMBIA, COLUMBIA, S. C.