

WHEN PLACING THESE LABELS IN 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 5.

(1) PLACE OF BIRTH

County of Aiken
 Township of Breagg
 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
2864

Registration District No. 2074 Registered No. 13
 (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 James Corbit Clevens {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? yes (7) DATE OF BIRTH Feb 11 1922
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Ellis Augustus Clevens
 (9) PRESENT POSTOFFICE OF FATHER Graniteville, S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 48 (Years)
 (12) BIRTHPLACE Graniteville, S.C.
 (13) OCCUPATION Second Hand Spinning

MOTHER
 (14) NAME BEFORE MARRIAGE Sarah Elizabeth Thompson
 (15) PRESENT POSTOFFICE OF MOTHER Graniteville, S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 33 (Years)
 (18) BIRTHPLACE Bath, S.C.
 (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 16 (21) Number of children of this mother now living, including present birth 15

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 2:40 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. R. Thurubull, D.S., M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Graniteville, S.C.

Given name added from a supplemental report
M. B. Woodward, M.D.
8.25.142 19 1922
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
Feb 25 1922 (27) Filed Feb 25 1922 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.

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MACHINE OF COLUMBIA, COLUMBIA, S. C.