

3 1/2 3 - 0 of 8 # 5 8 x 3

(1) PLACE OF BIRTH

County of Anderson
 Township of St. James
 or
 Inc. Town of St. James
 or
 City of St. James
 (if birth occurs in a hospital or other institution give name of same instead of street and number.)

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

File No.—For State Registrar Only
2811

Registration District No. 206 Registered No. 11
 (For use of Local Registrar)

(2) Full Name of Child Curley Rice

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

(3) SEX OF CHILD girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Feb 2 1923
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Curley Rice
 (9) PRESENT POSTOFFICE OF FATHER St. James
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 26
 (Year) (12) BIRTHPLACE Anderson Co
 (13) OCCUPATION Farming
 (14) Number of children born to mother, including present birth 1

MOTHER.
 (15) NAME BEFORE MARRIAGE Ivy Belle Berry
 (16) PRESENT POSTOFFICE OF MOTHER St. James
 (17) COLOR OR RACE negro (18) AGE AT LAST BIRTHDAY 27
 (Year) (19) BIRTHPLACE Anderson Co
 (20) OCCUPATION Housewife
 (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 Alive at 2 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Easter Martin
 (24) State whether Physician or Midwife Midwife (25) Address of Phys: or Midwife St. James

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
Feb 17 1923 (27) S. M. Yarbrough Local Registrar

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

See in the city and

WRITE PLAINLY, WITH SPANISH INK—THIS IS A PERMANENT RECORD.
 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 2.

Form of Columbia, Columbia, S. C.