

MARGIN RESERVED FOR BINDING
 WRITE PLAINLY, WITH UNFADING INK—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 3.
 BUREAU OF VITAL STATISTICS, COLUMBIA, S. C.

(1) PLACE OF BIRTH

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

(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

9A

345-304

Registration District No. Registered No.

(For use of Local Registrar)

(2) Full Name of Child

(3) BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth 2 (6) Are events Married? no (7) DATE OF BIRTH: 2/6/22
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jahn Mungen
 (9) PRESENT POSTOFFICE OF FATHER Char
 (10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 45
 (Year)
 (12) BIRTHPLACE Char
 (13) OCCUPATION shaver
 (20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Waisy Middleton
 (15) PRESENT POSTOFFICE OF MOTHER Char
 (16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 21
 (Year)
 (18) BIRTHPLACE Char
 (19) OCCUPATION hammer
 (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 W. Williams at 9:40 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. Williams (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife 115-6 3 St

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 2/7/22 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.