

Form No. 1

(1) PLACE OF BIRTH

County of

Fairfield

Township of

or

Inc. Town of

Wmmsboro

or

City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

30115

Registration District No. 14

Registered No. 41
(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

Rosa May Pinner

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

(3) BOY-OR
GIRL?

girl

(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 Sept. 19, 1922.
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME

J. N. Sims

(9) PRESENT
POSTOFFICE
OF FATHER

Wmmsboro S.C.

(10) COLOR
OR
RACE

colored

(11) AGE AT LAST
BIRTHDAY 47
(Years)

(12) BIRTHPLACE

(13) OCCUPATION

Minister of the Gospel

(20) Number of children born to
mother, including present birth

7

MOTHER.

(14) NAME BEFORE
MARRIAGE

Lucy Craig

(15) PRESENT
POSTOFFICE
OF MOTHER

Wmmsboro

(16) COLOR
OR
RACE

colored

(17) AGE AT LAST
BIRTHDAY 35
(Years)

(18) BIRTHPLACE

Fairfield Co S.C.

(19) OCCUPATION

House wife

(21) Number of children of this mother
now living, including present birth

7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was
on the date above stated.Born alive 4:10 P.M.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Leathin Ford

(24) State whether Physician or Midwife

midwife

(25) Address of Physician or Midwife

Wmmsboro S.C.

Given name added from a supplement-
tal report

(26) Witness

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

(27) Filed

Sept. 29, 1922

(28)

D. M. Haynes
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.FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
BUREAU OF COLUMBIA, COLUMBIA, S. C.