

Form No. 1

(1) PLACE OF BIRTH

County of Oceuil
Township of Juglers
or
Inc. Town of

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

File No.—For State Registrar Only

43916

Registration District No. 3505 Registered No. 180
(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 Ledis Wright 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 Dec 31 1922
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ledis Wright

(9) PRESENT POSTOFFICE OF FATHER Westminster Rd

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 37 (Years)

(12) BIRTHPLACE Oceuil Co SC

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Estude Emma

(15) PRESENT POSTOFFICE OF MOTHER Westminster Rd

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 36 (Years)

(18) BIRTHPLACE Oceuil Co SC

(19) OCCUPATION House and farm work

(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 Born alive at 12:00 Noon on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Harris

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Westminster

Given name added from a supplemental report

(26) Witness Ph 5 (Signature of Witness necessary only when question 23 is signed by mar)

(27) Filed Jan 7 1923 (28) J. D. Hume 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 5th month of pregnancy.

REG. OF COLUMBIA, COLUMBIA, S. C. FIRST-BORN, NO. 1. THE OTHER, No. 2, etc., in question 5.