

MARGIN RESERVED FOR BINDING.  
WHITE PLAINLY, WITH UNFADING 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 5.

(1) PLACE OF BIRTH

County of Shannonburg  
Township of .....  
or  
Inc. Town of .....  
or  
City of .....  
(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  
**23806**

Registration District No. 40-0 Registered No. 312  
(For use of Local Registrar)  
(No. 125 Weldon St.; ..... Ward)

(2) Full Name of Child Walter {If child is not yet named, make supplemental report as directed}

3) BOY OR GIRL? Boy (4) Twin or Triplet? To be answered only in case of Twins or Triplets (5) Number in order of birth 2 (6) Are Parents Married? yes (7) DATE OF BIRTH June 17, 1922  
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME W. C. Walker  
9) PRESENT POSTOFFICE OF FATHER Shannonburg S.C.  
10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 36  
(Years)  
12) BIRTHPLACE N.C.  
13) OCCUPATION Butcher  
20) Number of children born to mother, including present birth 2

MOTHER.

14) NAME BEFORE MARRIAGE Ellie Barnett  
15) PRESENT POSTOFFICE OF MOTHER Shannonburg S.C.  
16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 23  
(Years)  
18) BIRTHPLACE N.C.  
19) OCCUPATION Home-wife  
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 James at 19 A.M.,  
on the date above stated. (Born alive or stillborn) Hour \* M. or P. M.

(23) (Signature) James H. Carr, M.D.  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Shannonburg S.C.

Given name added from a supplemental report

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

(27) Filed 8-1- 19 22 (28) James H. Carr 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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