

PRINT NAME AND ADDRESS OF REGISTRAR IN LEFT MARGIN FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

Register Columbia, Columbia, S. C.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <i>Aiken</i>		STATE OF SOUTH CAROLINA		13413	
Township of <i>Mill Brook</i>		Bureau of Vital Statistics			
City of		State Board of Health			
Inc. Town of		Registration District No. <i>207</i>		Registered No. <i>21</i>	
City of		(No. <i>207</i> St.; <i>21</i> Ward)		(For use of Local Registrar)	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)					
(2) Full Name of Child <i>Lurise Jamison</i>					
If child is not yet named, make supplemental report as directed					
(3) BOY OR GIRL <i>Girl</i>	(4) Twin or Triplet? <i>Single</i>	(5) Number in order of birth <i>3</i>	(6) Are Parents Married? <i>Yes</i>	(7) DATE OF BIRTH <i>May 20 1922</i>	
To be answered only in event of Twins or Triplets					
FATHER			MOTHER		
(8) FULL NAME <i>George Jamison</i>			(14) NAME BEFORE MARRIAGE <i>Rosa Fuller</i>		
(9) PRESENT POSTOFFICE OF FATHER <i>Aiken S C</i>			(15) PRESENT POSTOFFICE OF MOTHER <i>Aiken S C</i>		
(10) COLOR OR RACE <i>Negro</i>			(17) AGE AT LAST BIRTHDAY <i>21</i>		
(11) AGE AT LAST BIRTHDAY (Years)			(18) BIRTHPLACE <i>Aiken Co S C</i>		
(12) BIRTHPLACE <i>Danville Co S C</i>			(19) OCCUPATION <i>Housewife</i>		
(13) OCCUPATION <i>Farmer</i>			(20) Number of children of this mother now living, including present birth <i>3</i>		
(21) Number of children of this mother now living, including present birth					
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <i>alive</i> at <i>12 P.</i> M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <i>Rend Carter</i>					
(24) State whether Physician or Midwife					
(25) Address of Physician or Midwife					
Given name added from a supplemental report					
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)					
(27) Filed <i>May 21 1922</i> (28) Local Registrar <i>J. H. Cook</i>					

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.