

(1) PLACE OF BIRTH

County of Cochran
 Township of Amelia
 OF
 Inc. Town of.....
 OF
 City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

17753

Registration District No. A200Registered No. 58
(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 Jarvis Guignard If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 10 1922
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Adam Guignard(9) PRESENT POSTOFFICE OF FATHER St. Matthews(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 31 (Years)(12) BIRTHPLACE South Carolina(13) OCCUPATION Farm work(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Katherine County(15) PRESENT POSTOFFICE OF MOTHER St. Matthews(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 25 (Years)(18) BIRTHPLACE South Carolina(19) OCCUPATION Farm work(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 9 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) L. J. Guignard(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife St. Matthews

Given name added from a supplemental report

(26) Witness A. R. P. R. (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed June 10 1922 (28) A. R. P. R. 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.