

## (1) PLACE OF BIRTH

County of Barnwell  
 Township of Buffalo Bridge  
 or  
 Loc. Town of None  
 or  
 City of None

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

File No. — For State Registrar Only  
**37246**

Registration District No. 401 Registered No. 120122  
 (For use of Local Registrar)

St. \_\_\_\_\_ Ward \_\_\_\_\_  
 (No. \_\_\_\_\_)  
 If birth occurs in a hospital or other institution, give name of same instead of street and number.)

## (2) Full Name of Child

BOY OR GIRL Boy (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Are Parents Married? no (7) DATE OF BIRTH Nov. 8, 1922  
 (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Mathew Dickinson  
 (9) PRESENT POSTOFFICE OF FATHER Clar. Se  
 (10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 19  
 (Years)  
 (12) BIRTHPLACE SC  
 (13) OCCUPATION farm work  
 (14) Number of children born to mother, including present birth \_\_\_\_\_

## MOTHER

(14) NAME BEFORE MARRIAGE Inez Dubois  
 (15) PRESENT POSTOFFICE OF MOTHER Clar. Se  
 (16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 16  
 (Years)  
 (18) BIRTHPLACE Clar. Se  
 (19) OCCUPATION farm work  
 (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 born alive at 6 P. M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Della Draper (24) Address of Physician or Midwife Clar. Se  
 (25) State whether Physician or Midwife midwife

Given name added from a supplemental report:

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

(27) Date Nov 9, 1922 (28) J. E. Bennett 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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