

WHITE PLAINLY: WITH UNPAID INC.—THIS IS A PERMANENT RECORD.  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the  
\$1000—HOLD. No. 1. THIS OFFICE, No. 2, etc, in question 3.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>York</u>		STATE OF SOUTH CAROLINA		2583	
Township of <u>Wadeville</u>		Bureau of Vital Statistics			
or Inc. Town of .....		State Board of Health			
City of .....		Registration District No. <u>4403</u>		Registered No. <u>7</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(For use of Local Registrar)			
(2) Full Name of Child <u>Leise James</u>		If child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yr</u>	(7) DATE OF BIRTH <u>Jan 25 1922</u>	(8) DATE OF BIRTH (Name of Month) (Day) (Year)
FATHER.			MOTHER.		
(9) FULL NAME <u>Robert James</u>			(14) NAME BEFORE MARRIAGE <u>Anna Henderson</u>		
(10) PRESENT POSTOFFICE OF FATHER <u>R3 Shreve</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>R3 Shreve</u>		
(11) COLOR OR RACE <u>Col</u>			(16) COLOR OR RACE <u>Col</u>		
(12) BIRTHPLACE <u>SC</u>			(17) BIRTHPLACE <u>SC</u>		
(13) OCCUPATION <u>Farmer</u>			(18) OCCUPATION <u>Domestic</u>		
(19) Number of children born to mother, including present birth <u>1</u>			(20) Number of children of this mother now living, including present birth <u>1</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(21) I hereby certify that I attended the birth of this child, who was <u>born</u> at <u>10</u> M., on the date above stated. (Hour A. M. or P. M.)					
(22) (Signature) <u>Anna Paul</u>					
(23) State whether Physician or Midwife (24) Address of Physician or Midwife <u>Wadeville</u>					
Given name added from a supplemental report					
(25) Witness (Signature of Witness necessary only when question 22 is signed by mark)					
(26) Filed <u>Jan 25 1922</u> (27) Local Registrar <u>M. B. Paul</u>					
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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