

Form No. 3

(1) PLACE OF BIRTH

County of Sumter
 Township of Calvary
 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

5383

Registration District No. 4.110.. Registered No. 5.....
 (For use of Local Registrar)

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

(2) Full Name of Child Jeff Ardia..... If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet (5) Number in order of birth (6) Are Parents Married yes (7) DATE OF BIRTH Feb. 14, 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Ardia
 (9) PRESENT POSTOFFICE OF FATHER Pinewood S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Year)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Lena Battelle
 (15) PRESENT POSTOFFICE OF MOTHER Pinewood S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Year)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 6

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alma M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Hays(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Pinewood 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 Mar. 10, 1923(28) O.S. Ruffin

Local Registrar

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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 stillborns before the fifth month of pregnancy.

WRITES PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 IN B-2b USE OF TWIN OR TRIPLETS SEE SEPARATE BLANK FOR EACH CHILD. SEE MARK TO FIRST-BORN. No. 1. THE OTHER, No. 2, etc. In question 1