

MARGIN RESERVED FOR INDEXING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and MARK the
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 2.

(1) PLACE OF BIRTH

County *Charlottesville*
 Township *Society Hill*
 or
 Inc. Town of.....
 or
 City of.....

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

File No.—For State Registrar Only
964

Registration District No. *15 C.* Registered No.
 (For use of Local Registrar)

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

(2) Full Name of Child *Eva J. Wilson* If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL *girl* (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? *yes* (7) DATE OF BIRTH *Jan 5 1922*
 To be answered only in event of Twin or Triplets

FATHER.			MOTHER.		
(8) FULL NAME <i>Henry Wilson</i>	(14) NAME BEFORE MARRIAGE <i>Estel Wilson</i>		(15) PRESENT POSTOFFICE OF FATHER <i>Society Hill</i>	(15) PRESENT POSTOFFICE OF MOTHER <i>Society Hill</i>	
(10) COLOR OR RACE <i>Negro</i>	(11) AGE AT LAST BIRTHDAY <i>24</i> (Years)		(16) COLOR OR RACE <i>Negro</i>	(17) AGE AT LAST BIRTHDAY <i>19</i> (Years)	
(12) BIRTHPLACE <i>S.C.</i>			(18) BIRTHPLACE <i>S.C.</i>		
(13) OCCUPATION <i>Laborer (Public)</i>			(19) OCCUPATION <i>Housewife</i>		
(20) Number of children born to mother, including present birth <i>2</i>			(21) Number of children of this mother now living, including present birth <i>1</i>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 (22) I hereby certify that I attended the birth of this child, who was *born alive* at *7 P.* M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) *H. J. Frankner*
 (24) State whether Physician or Midwife *Midwife* (25) Address of Physician or Midwife *Society Hill*

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Registrar *Jan 31 1922*

When there was no attending physician or midwife, the father, householder, etc., should make this return. If a child breathes even once, it must be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.