

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 5.

(1) PLACE OF BIRTH

County of Aiken  
Township of McTier  
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

40606

Registration District No. 2.0.8 Registered No. 24  
(For use of Local Registrar)

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

(2) Full Name of Child Robert Inse Littles If child is not yet named, make supplemental report as directed

(3) ~~Boy or Girl?~~ girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 25 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Littles  
(9) PRESENT POSTOFFICE OF FATHER Earle, S.C.  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 35  
(Years)  
(12) BIRTHPLACE Aiken Co  
(13) OCCUPATION Farming  
(20) Number of children born to mother, including present birth 12

MOTHER.

(14) NAME BEFORE MARRIAGE Emma Baston  
(15) PRESENT POSTOFFICE OF MOTHER Earle, S.C.  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 33  
(Years)  
(18) BIRTHPLACE Aiken Co  
(19) OCCUPATION Housewife  
(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 Alive at 7 P.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Jane Carroll  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Earle, 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 1/1 19 23 (28) J.C. Jones 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.