

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.

Form No. 1

(1) PLACE OF BIRTH

County of Newberry
Township of H. 9
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

43854

Registration District No. 341.0 Registered No. 123
(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 Mildred Elizabeth Davis 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 9, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Cecil Davis
(9) PRESENT POSTOFFICE OF FATHER Persimoty Se
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 20
(Years)
(12) BIRTHPLACE Newberry Co
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Pearl Bator
(15) PRESENT POSTOFFICE OF MOTHER Persimoty Se
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 18
(Years)
(18) BIRTHPLACE Newberry Co
(19) OCCUPATION Housewife
(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... alive... at 5:52 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Biles

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Persimoty Se

Given name added from a supplemental report

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

(27) Filed Dec 14, 1922 (28) W. T. Gibson 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.