

MARGIN RESERVED FOR BUNDLING.

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.  
 B. 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 1.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		No. B.—For this Register	
County of <u>Barnwell</u>		STATE OF SOUTH CAROLINA		34729	
Township of <u>Ruford Bridge</u>		Bureau of Vital Statistics			
Inc. Town of <u>Olney</u>		State Board of Health			
City of		Registration District No. <u>4a.1</u>		Registered No. <u>10.2</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. .... St. .... Ward)		(For use of Local Registrar)	
(2) Full Name of Child <u>Martha Sue Morris</u>					
(If child is not yet named, make supplemental report as directed)					
(3) SEX OF CHILD <u>Girl</u>	(4) Age or Approx. To be entered only in case of Twins or Triplets	(5) Number in order of birth	(6) Age of Mother <u>25</u>	(7) DATE OF BIRTH <u>Nov. 16, 1923</u>	
FATHER.			MOTHER.		
(8) FULL NAME <u>Corinthian Morris</u>			(10) NAME BEFORE MARRIAGE <u>Mattie Lou Boutnight</u>		
(9) PRESENT RESIDENCE OF FATHER <u>Olney S.C.</u>			(11) PRESENT RESIDENCE OF MOTHER <u>Olney S.C.</u>		
(12) COLOR OR RACE <u>white</u>			(13) COLOR OR RACE <u>white</u>		
(14) AGE AT LAST BIRTHDAY <u>29</u>			(15) AGE AT LAST BIRTHDAY <u>27</u>		
(16) BIRTHPLACE <u>Olney S.C.</u>			(17) BIRTHPLACE <u>Batesburg S.C.</u>		
(18) OCCUPATION <u>farmer</u>			(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>2</u>			(21) Number of children of this mother now living, including present birth <u>1</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <u>born alive</u> on the date above stated.					
(23) (Signature) <u>Wm. E. Bennett</u>					
(24) State whether Physician or Midwife <u>Physician</u>					
(25) Address of Physician or Midwife <u>Kennett S.C.</u>					
Given name added from a supplementary report			(26) Witness		
			(Signature of Witness necessary only when question 25 is signed by mark)		
19 .....			(27) Filed <u>Dec. 10, 1923</u>		
Registrar			(28) <u>J. E. Bennett</u>		

When there was no attending physician or midwife, then the father, householder, etc., must report as stillborn. No report is necessary if a child breathes even once. It must not be reported as stillborn. No report is necessary before the fifth month of pregnancy.