

With name or pregnancy.

(1) PLACE OF BIRTH

County of Newberry

Township of Whitman

or

Inc. Town of Whitman

or

City of Whitman

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

31405

Registration District No. 3402

Registered No. 112

(For use of Local Registrar)

(2) Full Name of Child Jessamine Evans

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

(7) DATE OF BIRTH

Sept 18 1922

FATHER.

(8) FULL NAME Wm. T. Evans

(9) PRESENT POSTOFFICE OF FATHER Whitman

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Georgia

(13) OCCUPATION Cotton Picker

(14) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Mrs. Frazier

(15) PRESENT POSTOFFICE OF MOTHER Whitman

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY 2 (Years)

(18) BIRTHPLACE Augusta Ga.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was White, at 3:30 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. E. Braxton

(24) State of South Carolina (25) Address of Physician or Midwife Whitman

Given name added from a supplemental report

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

(27) Filed Oct 10, 1922 (28) R. M. Duerst 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.