

(1) PLACE OF BIRTH

County of Orangeburg  
 Township of Edisto  
 or  
 Inc. Town of .....  
 or  
 City of .....  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only  
**16182**

Registration District No. 3603

Registered No. 18  
 (For use of Local Registrar)

(2) Full Name of Child Mamie Warren

If child is not yet named, make supplemental report as directed

(3) ~~BOY~~ GIRL? Girl (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 28, 1922  
 (Name of Month) (Day) (Year)  
 To be answered only in event of Twin or Triplets

**FATHER.**

(8) FULL NAME Joe Warren  
 (9) PRESENT POSTOFFICE OF FATHER Cordova, S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29 (Years)  
 (12) BIRTHPLACE Orangeburg County  
 (13) OCCUPATION Farm Laborer

**MOTHER.**

(14) NAME BEFORE MARRIAGE Lizzie Ford  
 (15) PRESENT POSTOFFICE OF MOTHER Cordova, S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Years)  
 (18) BIRTHPLACE Orangeburg County  
 (19) OCCUPATION House Keeper

(20) Number of children born to mother, including present birth 3 (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 alive at 10 P.M. on the date above stated.  
 (Born alive or stillborn) (Hour \* M. or P. M.)

(23) (Signature) Jane Williams, Cordova, S.C.  
 (24) State whether Midwife (25) Address of Midwife

Given name added from a supplemental report

(26) Witness A. H. Smoak  
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed May 20, 1922 (28) M. K. Antley 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.

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