

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

48552

County of

Township of

Inc. Town of

City of

(if birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 1107...Registered No. 7

(For use of Local Registrar)

(2) Full Name of Child

Janis Bell

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

(3) BOY OR GIRL

Girl

(4) Twin or Triplet?

Is to be entered only in case of twins or triplets

(5) Number in order of birth

7

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

2 8 1911

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Will Means

(9) PRESENT POSTOFFICE OF FATHER

Blackstock S.C.

(10) COLOR OR RACE

Black

(11) AGE AT LAST BIRTHDAY

33

(Years)

(12) BIRTHPLACE

Fairfield Co. S.C.

(13) OCCUPATION

Farmer

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

Seven

MOTHER.

(14) NAME BEFORE MARRIAGE

Hettie Jordan

(15) PRESENT POSTOFFICE OF MOTHER

Blackstock S.C.

(16) COLOR OR RACE

Black

(17) AGE AT LAST BIRTHDAY

32

(Years)

(18) BIRTHPLACE

Fairfield Co. S.C.

(19) OCCUPATION

Domestic

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

Seven

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn, on the date above stated.

(23) (Signature) E. J. Varnadac

(24) State whether Physician or Midwife

Blackstock S.C.

Given name added from a supplemental report

(26) Witness

E. J. Varnadac

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

(27) Filed 2/23/11

(28) R. J. Varnadac

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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Form No. 10. MAINLY RECEIVED FOR BIDDING.
 WRITER 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.
 Day of Columbia.