

(1) PLACE OF BIRTH

County of Moultrie
 Township of Reed Hill
 or
 Inc. Town of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

39433

Registration District No. 3307Registered No. 42
(For use of Local Registrar)

City of (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 James Salinas If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 20, 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Henry Steen
 (9) PRESENT POSTOFFICE OF FATHER Bennettsville S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 41 (Years)
 (12) BIRTHPLACE Mar. Co. S.C.
 (13) OCCUPATION Clifton Hill apes.
 (20) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Dora Pule
 (15) PRESENT POSTOFFICE OF MOTHER Bennettsville S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 40 (Years)
 (18) BIRTHPLACE Mar. Co. S.C.
 (19) OCCUPATION H.W.
 (21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Dr. J. H. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Bennettsville S.C.

Given name added from a supplemental report

M. B. Woodward
May 23, 1922
 Registrar

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

(27) Filed Dec 14, 22 (28) J. H. Smith 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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