

Form No. 1

(1) PLACE OF BIRTH

County of SumterTownship of Waltonor
Inc. Town of Sumteror
City of Sumter

(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

32533

Registration District No. 4-111 Registered No. 58
(For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child James Earl Webb 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 5 22
(Name of Month) (Day) (Year)

FATHER. MOTHER.

(8) FULL NAME Consett Weeks (14) NAME BEFORE MARRIAGE Marcell Ora(9) PRESENT POSTOFFICE OF FATHER Greenwood SC (15) PRESENT POSTOFFICE OF MOTHER Greenwood SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28
(Years) (Years)(12) BIRTHPLACE SC (18) BIRTHPLACE S.C.(13) OCCUPATION Public Worker (19) OCCUPATION Domestic(20) Number of children born to mother, including present birth 2 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour, M. or P.M.)(23) (Signature) Margaret A. McKeefe (24) State Whether Physician or Midwife Midwife (25) Address of Physician or Midwife Greenwood SC

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 C.S. Greenwood 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.

MARGIN FOR REMARKS. THIS RECORD, WHEN FILING IN A PERMANENT RECORD, WRITE PLAINLY, WITH UNFADING INK—THIS IS A SEPARATE BLANK FOR EACH CHILD, AND MARK THE 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.

RECEIVED OF COLUMBIA, COLUMBIA, N. C.