

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.

(1) PLACE OF BIRTH

County of Edgefield  
Township of Shaw  
or  
Inc. Town of .....  
or  
City of ..... (No. .... St.; .... Ward)  
(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  
**30026**

Registration District No. 1810 Registered No. 28  
(For use of Local Registrar)

(2) Full Name of Child

Annice Sherr

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 9 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 3 1922  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME Robert Sherr  
(9) PRESENT POSTOFFICE OF FATHER Trenton, S. C.  
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 31 (Years)  
(12) BIRTHPLACE Edgefield Co.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 9

MOTHER  
(14) NAME BEFORE MARRIAGE Shida Stevens  
(15) PRESENT POSTOFFICE OF MOTHER Trenton, S. C.  
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 30 (Years)  
(18) BIRTHPLACE Edgefield Co.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Asatula C. Smith  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Trenton, S. C.

Given name added from a supplemental report

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

(27) Filed Sept 9 1922 (28) D. H. Sherry 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.