

(1) PLACE OF BIRTH

County of LaurensTownship of Hunteror
Inc. Town of Clintonor
City of Clinton

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

19257

Registration District No. a. 2902 Registered No. 62

(For use of Local Registrar)

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

3) BOY OR GIRL? <u>Boy</u>	4) Twin or Triplet? <u>✓</u> To be answered only in event of Twins or Triplets	5) Number in order of birth <u>2</u>	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>May 14, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

8) FULL NAME Hugh B. Workman9) PRESENT POSTOFFICE OF FATHER Clinton SC. R.F.D. #310) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27
(Years)12) BIRTHPLACE Laurens County13) OCCUPATION Farmer20) Number of children born to mother, including present birth 121) Number of children of this mother now living, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Cornelia Duran(15) PRESENT POSTOFFICE OF MOTHER Clinton, SC. R.F.D. #3(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25
(Years)(18) BIRTHPLACE Newberry County(19) OCCUPATION House wife(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 4 P. M. on the date above stated. (Hour A. M. or P. M.)(23) (Signature) J. W. Davis

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Clinton 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 July 8, 1922 (28) J. L. H. Bailey
Registrar Sub-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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