

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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.

DEPT. OF COMMERCE, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Marion
Township of Marion
OR
Inc. Town of.....
OR
City of.....

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

Registration District No. 1705 Registered No. 58
(For use of Local Registrar)
(No. St.; Ward)

File No.—For State Registrar Only
42168

(2) Full Name of Child

(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 Oct 20 1922
(If child is not yet named, make supplemental report as directed)
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Robert M. Ramey
(9) PRESENT POSTOFFICE OF FATHER Summerville, S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Year)
(12) BIRTHPLACE Summerville, S.C.
(13) OCCUPATION Teacher
(20) Number of children born to mother, including present birth Six

(14) NAME BEFORE MARRIAGE Mary J. Ramey
(15) PRESENT POSTOFFICE OF MOTHER Summerville, S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36 (Year)
(18) BIRTHPLACE Summerville, S.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive... at 8 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Charles D. Ramey
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Summerville, S.C.

Given name added from a subsequent report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mother)
(27) Filed Dec 21 1922 (28) C. D. Ramey Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child is born dead, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.