

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

FORM NO. 7 MARGIN RESERVED FOR BINDING.

No. B.—In case of TWINS or TRIPLETS use a SEPARATE BLANK for each child, and mark the MARGIN OF COLUMBIA FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH **Chesterfield** **CERTIFICATE OF BIRTH**
 County of **Chesterfield** STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only
3650

Township of **Chester**
 or
 Inc. Town of **Chester** Registration District No. **12 A** Registered No. **8**
 or
 City of **Chester** (No. **8** St. **8** Ward) (For use of Local Registrar)

(2) Full Name of Child: **James Nelson Durall** 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 **Feb. 21 1922**
(to be answered only in case of Twins or Triplets) (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME **Howard Mason Dunal** (14) NAME BEFORE MARRIAGE **Howard Mason Dunal**

(9) PRESENT POSTOFFICE OF FATHER **Chester S.C.** (15) PRESENT POSTOFFICE OF MOTHER **Chester S.C.**

(10) COLOR OR RACE **White** (11) AGE AT LAST BIRTHDAY **42** (16) COLOR OR RACE **White** (17) AGE AT LAST BIRTHDAY **42**
(Years) (Years)

(12) BIRTHPLACE **S. C.** (18) BIRTHPLACE **S. C.**

(13) OCCUPATION **Banker** (19) OCCUPATION **Housewife**

20) Number of children born to mother, including present birth **3** (21) Number of children of this mother now living, including present birth **2**

MOTHER.

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was **White** at **140 P.** M., on the date above stated. (Born alive **Yes** or **No** or **Sl.**)

(23) (Signature) **R. E. Bull** (24) State whether Physician or Midwife **Physician** (25) Address of Physician or Midwife **Chester S.C.**

Given name added from a supplemental report **191**

(26) Witness (Signature of Witness necessary only when question 23 is signed) **R. E. Bull**

(27) Filed **Mar 1 1922** (28) **Walter D. Duncanson** 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.

Registrar **Walter D. Duncanson**

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only

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