(1) PLACE OF BIRTH

County of Marlboro

Township of Bennettsville

or

Inc. Town of .....

or

City of .....

(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

Registration District No. 3301

File No.—For State Registrar Only

31291

Registered No. 124

(For use of Local Registrar)

(No. ..... St.; ..... Ward)

(2) Full Name of Child Miss Mason

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

(3) BOY OR GIRL? Girl

(4) Twin or Triplet? To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH April 30 1922 (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Jimmie Mason

(9) PRESENT POSTOFFICE OF FATHER Bennettsville S.C.

(10) COLOR OR RACE Colored

(11) AGE AT LAST BIRTHDAY 25 (Years)

(12) BIRTHPLACE Marlboro Co. S.C.

(13) OCCUPATION Farmer

(22) Number of children born to mother, including present birth 13

MOTHER

(14) NAME BEFORE MARRIAGE Mary Mason

(15) PRESENT POSTOFFICE OF MOTHER Bennettsville S.C.

(16) COLOR OR RACE Colored

(17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Marlboro Co. S.C.

(19) OCCUPATION Housework

(21) Number of children of this mother now living, including present birth 13

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 11 a.m. on the date above stated.

(Dead alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Olga Howson

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Bennettsville S.C.

Given name added from a supplemental report

..... 19 .....

Registrar

(20) Witness .....

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

(27) Filed May 1 1922 (28) Wm. H. Pate

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.

Bureau of Columbia, Columbia, S. C.

Act of Congress, approved June 2, 1902, Sec. 2, etc., in question 5.