

Form No 1.

(1) PLACE OF BIRTH

County of

Township of

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

File No.—For State Registrar Only

49449

Registration District No. 1402

Registered No. 20

(For use of Local Registrar)

(2) Full Name of Child James Oliver Jennings

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

(3) BOY OR GIRL? boy

(4) Twin or Triplet?

(5) Number in order of birth 4

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Feb. 14

1906

## FATHER.

(8) FULL NAME Sam Jennings

(9) PRESENT POSTOFFICE OF FATHER Hampton SC

(10) COLOR OR RACE Cold

(11) AGE AT LAST BIRTHDAY 38

(Years)

(12) BIRTHPLACE Hampton Co

(13) OCCUPATION Railroad work

(20) Number of children born to mother, including present birth 4

## MOTHER.

(14) NAME BEFORE MARRIAGE Isella Jennings

(15) PRESENT POSTOFFICE OF MOTHER Hampton

(16) COLOR OR RACE Cold

(17) AGE AT LAST BIRTHDAY 37

(Years)

(18) BIRTHPLACE Hampton Co

(19) OCCUPATION House work

(21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Mollie Rod mid wife

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Hampton SC

Given name added from a supplemental report

191....

Registrar

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 7/18

1916

(28)

J. D. Rogers

State 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.

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

N. B.—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.

McCaw, of Columbia.