

See vol 1-5 no 2182

MARGIN RESERVED FOR BINDING.
WRITE 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.

(1) PLACE OF BIRTH
County of Greenville
Township of
or
Inc. Town of Piedmont
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
22292

Registration District No...22... Registered No...27...
(For use of Local Registrar)

(2) Full Name of Child Hazel M Nix {If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH...June 16, 1924
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME E L Nix
(9) PRESENT POSTOFFICE OF FATHER Piedmont S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY...42... (Years)
(12) BIRTHPLACE Ga
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 13

MOTHER.
(14) NAME BEFORE MARRIAGE Collie Reems
(15) PRESENT POSTOFFICE OF MOTHER Piedmont
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY...36... (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Domestic
(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...12:30 P.M.... on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. H. Campbell
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Piedmont

Given name added from a supplemental report
.....
....., 19... Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed July 1, 1924 (28) J. H. Bell 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.