

COPIES OF TRIPLETS AND A SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Dillon</u>		STATE OF SOUTH CAROLINA		4968	
Township of <u>7</u>		Bureau of Vital Statistics			
or Inc. Town of		State Board of Health			
City of		Registration District No. <u>3705</u>		Registered No. <u>15</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. St.; Ward)		(For use of Local Registrar)	
(2) Full Name of Child <u>Jane Victoria Hamilton</u>		If child is not yet named, make supplemental report as directed			
3) BOY OR GIRL <u>Boy</u>	4) Twin or Triplet <u>To be answered only in event of Twin or Triplet</u>	5) Number in order of birth	6) Are Parents Married <u>Yes</u>	7) DATE OF BIRTH <u>Feb 1 1923</u> (Name of Month) (Day) (Year)	
PATHER.			MOTHER.		
8) FULL NAME <u>Jane Victoria Hamilton</u>			10) NAME BEFORE MARRIAGE <u>Elizabeth Hamilton</u>		
9) PRESENT POSTOFFICE OF FATHER <u>Clinton 26</u>			11) PRESENT POSTOFFICE OF MOTHER <u>Clinton 26</u>		
12) COLOR OR RACE <u>White</u>			13) AGE AT LAST BIRTHDAY <u>47</u> (Years)		
14) BIRTHPLACE <u>Idaho</u>			15) BIRTHPLACE <u>Idaho</u>		
16) OCCUPATION <u>Farmer</u>			17) OCCUPATION <u>Housewife</u>		
20) Number of children born to mother, including present birth <u>6</u>			21) Number of children of this mother now living, including present birth <u>5</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was <u>born</u> at <u>11:44</u> A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>J. H. Bays</u>					
(24) State whether Physician or Midwife <u>Physician</u>					
(25) Address of Physician or Midwife <u>Clinton 26</u>					
Given name added from a supplemental report			(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)		
19			(27) Filed <u>Mar 8 1923</u> (28) <u>J. H. Bays</u> 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.

As a union remains even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.