

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No. - For State Registrar Only

County of Chesterfield  
Township of Wilmington  
or  
Inc. Town of .....  
or  
City of .....

STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

816

Registration District No. 1216 Registered No. 3  
(For use of Local Registrar)

(2) Full Name of Child Del Evans

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 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 30 1922  
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Rich Evans  
(9) PRESENT POSTOFFICE OF FATHER Jagland, S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40 (Year)  
(12) BIRTHPLACE Chesterfield Co.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth Three

MOTHER.  
(14) NAME BEFORE MARRIAGE Annie Laney  
(15) PRESENT POSTOFFICE OF MOTHER Jagland, S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Year)  
(18) BIRTHPLACE Chesterfield  
(19) OCCUPATION House Wife  
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was W.R. at 9:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Miss Welden England  
(24) State whether Physician or Midwife  (25) Address of Physic. or Midwife

Given name added from a supplemental report

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

(27) Filed 1/31 19 22 (28) Wilmington 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.

RECEIVED BY THE REGISTRAR OF BIRTHS AND DEATHS, STATE BOARD OF HEALTH, COLUMBIA, S. C. FIRST-BORN, NO. 1. THIS OTHER, NO. 2, ETC., IN QUESTION 2.