

MARGIN RESERVED FOR BINDING.
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 make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Kershaw
Township of Ballgale
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

4668

Registration District No. 2100 Registered No. 22
(For use of Local Registrar)

City of (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child John Ervin Wails Jr. If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in case of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Jan 24 1922</u> (Month) (Day) (Year)
FATHER.			MOTHER.	
(9) FULL NAME <u>John Ervin Wails</u>			(14) NAME BEFORE MARRIAGE <u>Rosa Baker</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Kershaw S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Kershaw S.C.</u>	
(10) COLOR OR RACE <u>white</u>			(16) COLOR OR RACE <u>white</u>	
(11) AGE AT LAST BIRTHDAY <u>4.0</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>3.1</u> (Years)	
(12) BIRTHPLACE <u>D.C.</u>			(18) BIRTHPLACE <u>D.C.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>House</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 born alive at 9:30 P.M. on the date above stated.
(Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature) [Signature]
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife
W. D. Kershaw D.C.

Given name added from a supplemental report

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

(27) Filed JAN 26 1922 (28) 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.

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