

(1) PLACE OF BIRTH

County of Laurens
 Township of Laurens
 or
 Inc. Town of Laurens
 or
 City of Laurens

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

File No.—For State Registrar Only
19231

Registration District No. 299 Registered No. 68
 (For use of Local Registrar)
 (No. 1015 Sullivan St.; fourth Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Jim B. Davis

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1
 To be answered only in event of Twins or Triplets (6) Are Parents Married? Yes (7) DATE OF BIRTH June 7, 1922
 (Month) (Day) (Year)

FATHER.

(8) FULL NAME Jim Davis
 (9) PRESENT POSTOFFICE OF FATHER Laurens S C
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 26
 (Years) (12) BIRTHPLACE Laurens Co.
 (13) OCCUPATION section hand

MOTHER.

(14) NAME BEFORE MARRIAGE Lucile Fuller
 (15) PRESENT POSTOFFICE OF MOTHER Laurens S C
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 23
 (Years) (18) BIRTHPLACE Laurens Co.
 (19) OCCUPATION Laundress

(20) Number of children born to mother, including present birth 3 (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 born alive at 7:5 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Laura Blaseley
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Laurens S C

Given name added from a supplemental report

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

(27) Filed July 3, 1922 (28) C. E. Kennedy
 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.