

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.

DEPARTMENT OF COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Barnwell
 Township of Barnwell
 OR
 Inc. Town of Barnwell
 OR
 City of Barnwell

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

28931

Registration District No. 501 Registered No. 47
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Virginia Louise Black

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? X (5) Number in order of birth X (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 25 1922
 (Specify Month) (Day) (Year)

FATHER.
 (8) FULL NAME Franklin Black
 (9) PRESENT POSTOFFICE OF FATHER Barnwell S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 39
 (Year)
 (12) BIRTHPLACE Barnwell S.C.
 (13) OCCUPATION Farmer

MOTHER.
 (14) NAME BEFORE MARRIAGE Lucie Byrd
 (15) PRESENT POSTOFFICE OF MOTHER Barnwell S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30
 (Year)
 (18) BIRTHPLACE Kings Trust S.C.
 (19) OCCUPATION H. Wife

(20) Number of children born to mother, including present birth 1
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn at 4 P.M. on the date above stated. (Hour, M. or P.M.)

(23) (Signature) [Signature]
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Barnwell S.C.

Given name added from a supplemental report

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

(27) Filed Oct 10 1922 (28) N. F. Kestelove 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.