

THIS IS A PERMANENT RECORD. 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 3

(1) PLACE OF BIRTH

County of StorryTownship of Lawson

Inc. Town of

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

22682

Registration District No. 2509thRegistered No. 76
(For use of Local Registrar)(No. William St.; Ward)

(2) Full Name of Child

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in case of Twins or Triplets

(5) Number in order of birth 10

(6) Are Parents Married?

no

(7) DATE OF

BIRTH June 20, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Robert L. Mullins

(9) PRESENT POSTOFFICE OF FATHER

Mullins, S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

40
(Years)

(12) BIRTHPLACE

Mullins, Marion S.C.

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

10

MOTHER.

(14) NAME BEFORE MARRIAGE

Laura Williams

(15) PRESENT POSTOFFICE OF MOTHER

Loris #2 SC

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

30
(Years)

(18) BIRTHPLACE

South Carolina

(19) OCCUPATION

Wired nurse

(21) Number of children of this mother now living, including present birth

8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Marion Mullins

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Mullins, S.C.

Given name added from a supplemental report

(26) Witness

W. L. Long
(Signature of Witness necessary only when question 23 is signed by mark)

19

(27) Filed

June 7, 1922 (28) Marion Mullins
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.