

Form No. 1

(1) PLACE OF BIRTH

County of Orangeburg
 Township of City
 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

31578

Registration District No. 36-aRegistered No. 148
(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 Henry Clay Dupont

(1) BOY OR GIRL Boy (4) Twin or Triplet? Yes (5) Number in order of birth 1 (6) Parents Married? yes (7) DATE OF BIRTH Sept 24, 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Luss Dupont(9) PRESENT POSTOFFICE OF FATHER City, S. C.(10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE City, Co. S. C.(13) OCCUPATION Public Laborer(14) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Belle Hunches(15) PRESENT POSTOFFICE OF MOTHER City, S. C.(16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 25 (Years)(18) BIRTHPLACE City, Co. S. C.(19) OCCUPATION House work(20) Number of children of this mother now living, including present birth none

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... Born alive... at 2:00 M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Reed(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife City, 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 7, 1922 (28) W. H. Hines 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.