

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.

(1) PLACE OF BIRTH

County of Lancaster
 Township of Cane Creek
 OR
 Inc. Town of.....
 OR
 City of.....

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

Registration District No. 2801

File No.—For State Registrar Only
30910

Registered No. 34
 (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 Piggie Mobley

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

(3) BOY OR GIRL girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 14, 1922
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME John Mobley
 (9) PRESENT POSTOFFICE OF FATHER Riverside, S.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 40
 (12) BIRTHPLACE Lancaster Co.
 (13) OCCUPATION Day laborer
 (20) Number of children born to mother, including present birth 1 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Pora Vickers
 (15) PRESENT POSTOFFICE OF MOTHER Riverside S.C.
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 24
 (18) BIRTHPLACE Lancaster Co
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 1 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Pamer
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Riverside S.C.

Given name added from a supplemental report

(26) Witness Mrs. V. L. Driffin
 (Signature of Witness necessary only when question 23 is signed by mark)

19 1922 Registrar

(27) Filed Sept 22, 1922 (28) W. Driffin 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.