

Form No. 1

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 Kewberry
 Township of Peak #12
 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

43861

Registration District No. 3411 Registered No. 26
 (For use of Local Registrar)

(No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Paul Hugh Kelums 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 (6) Are Parents Married? No (7) DATE OF BIRTH Dec 4 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Koris Roberson
 (9) PRESENT POSTOFFICE OF FATHER Peak
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 35 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION R.R. labor
 (20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Hattie Kelums
 (15) PRESENT POSTOFFICE OF MOTHER Peak
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 29 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Farming
 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Masuria Boyd(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Peak

Given name added from a supplemental report

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

(27) Filed Dec 12 1922 (28) G. H. S. Ready 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.