

File No.—For State Registrar Only

53889

Bureau of Vital Statistics
State Board of Health

Inc. Town of Registration District No. 4.100 Registered No. 167
(For use of Local Registrar)
City of (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... Joseph James... } If child is not yet named, make supplemental report as directed

(2) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <i>to be answered only in case of Twin or Triplet's</i>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <div style="display: flex; justify-content: space-between; align-items: center;"> (Name of Month) (Day) (Year) </div> <div style="display: flex; justify-content: space-between; align-items: center;"> <u>Mar.</u> <u>10</u> <u>60</u> </div>
---------------------------------------	--	-------------------------------------	---	--

FATHER.

MOTHER

(9) FULL NAME Alex Lerner

(14) NAME BEFORE MARRIAGE Lissie Williams

9) PRESENT
POSTOFFICE
OF FATHER

(15) PRESENT
POSTOFFICE
OF MOTHER

(10) COLOR OR RACE *black* (11) AGE AT LAST BIRTHDAY *39* (Years)

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 33 (Years)

(12) BIRTHPLACE S. C.

(18) BIRTHPLACE S. C.

(13) OCCUPATION Farming

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth } 2

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(33) (Signature) Winnie W. Thompson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(23) Witness L. E. Newman
(Signature of Witness necessary only
when question 22 is signed by mark)

11. What is the purpose of the study?

(27) Filed 7/14/1916 (28) *Wm. J. ...*
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.