

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.  
 M. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and add the  
 FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 4.

(1) PLACE OF BIRTH  
 County of Chester  
 Township of Lewisville  
 or  
 Inc. Town of.....  
 or  
 City of..... (No. .... St. .... Ward)  
 (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

No. 3391

Registration District No. 1106 Registered No. 4  
 (For use of Local Registrar)

(2) Full Name of Child George Washington Black (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD <u>Boy</u>	(4) Twin or Triplet To be answered only in case of Twin or Triplet	(5) Number in order of birth	(6) Age of Mother <u>24</u>	(7) DATE OF BIRTH <u>Feb. 22, 23</u> (Month of Month) (Day) (Year)
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FATHER		MOTHER	
(8) FULL NAME <u>Geo Black</u>	(14) NAME BEFORE MARRIAGE <u>Mattie Mary Peay</u>	(9) PRESENT RESIDENCE OF FATHER <u>Righting S.C. #2</u>	(15) PRESENT RESIDENCE OF MOTHER <u>Righting S.C. #</u>
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>35</u> (Year)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>33</u> (Year)
(12) BIRTHPLACE <u>Chester County</u>	(18) BIRTHPLACE <u>Chester County</u>	(19) OCCUPATION <u>Tanner</u>	(20) OCCUPATION <u>Domestic</u>
(21) Number of children born to mother, including present birth <u>10</u>	(22) Number of children of this mother now living, including present birth <u>9</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was White at 7-20 AM. on the date above stated. (Born alive or stillborn) (Hour) (Date P. M.)

(24) (Signature)  
J. N. Gustin  
 Physician or Midwife

(25) Address of Physician or Midwife  
Edgemoor S.C.

Given name added from a supplemental report

(26) Witness  
 (Signature of Witness necessary only when question 23 is signed by mother)  
J. H. C. H.

(27) Filed 3-5-23 (28) J. H. C. H. Local Registrar

19... 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 a stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

Division of Columbia, Columbia, S. C.