

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH LEADING INK—THIS IS A PERMANENT RECORD.
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 Sumter
Township of Lowland
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
32432

Registration District No. 4100 Registered No. 58
(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 Joe Daniels Jr. 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 4 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 7, 1922
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
8) FULL NAME <u>Joe Daniels</u>	14) NAME BEFORE MARRIAGE <u>Bell Hendrick</u>	9) PRESENT POSTOFFICE OF FATHER <u>Windsor St</u>	15) PRESENT POSTOFFICE OF MOTHER <u>Windsor St</u>
10) COLOR OR RACE <u>Negro</u> (11) AGE AT LAST BIRTHDAY <u>27</u> (Years)	16) COLOR OR RACE <u>Negro</u> (17) AGE AT LAST BIRTHDAY <u>25</u> (Years)	12) BIRTHPLACE <u>St</u>	18) BIRTHPLACE <u>St</u>
13) OCCUPATION <u>farmerhand</u>	19) OCCUPATION <u>housewife</u>	20) Number of children born to mother, including present birth <u>4</u>	21) Number of children of this mother now living, including present birth <u>4</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 4 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Martha L. Lewis
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sumter St. R. 1

Given name added from a supplemental report
.....
..... 19 ..
Registrar
(26) Witness T. D. Primmy
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Sept 24, 1922 (28) R. J. Kinney
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.