

MARGIN RESERVED FOR BINDING.

WHITE PLAINLY, WITH UNFADING 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.

RECEIVED OF COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Florence
Township of Effingham
OR
Inc. Town of Billy
OF
City of Robert
(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. — For State Registrar Only
34389

Registration District No. 2004
(No. Billy ROBERT)

Registered No. 5-9
(For use of Local Registrar)

(2) Full Name of Child Robert Billy Anderson

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet? No
To be answered only in case of Twin or Triplet

(5) Number in order of birth 1st

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Oct 25 22
(Name of Month) (Day) (Year)

(8) FULL NAME Wilford Anderson

(9) PRESENT POSTOFFICE OF FATHER Timmonsville

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 22
(Years)

(12) BIRTHPLACE Timmonsville

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

(14) NAME BEFORE MARRIAGE Clyde Kirby

(15) PRESENT POSTOFFICE OF MOTHER Timmonsville

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY 18
(Years)

(18) BIRTHPLACE Timmonsville

(19) OCCUPATION Housekeeper

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 3:45 M.,
on the date above stated. (born alive or stillborn) (Hour A. M. or P. M.)

(23) Given name added from a supplemental report

(24) State whether Physician or midwife Physician

(25) Address of Physician or Midwife Timmonsville

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

(27) Filed Nov 6 - 22 (28) W. C. Hill
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.