

MARGIN RESERVED FOR INDEXING.
WRITE PLAINLY, WITHOUT FOLDING—THIS IS A PERMANENT RECORD.
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 Cherokee
Township of Star
or
Inc. Town of
City of (No. St. Ward)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
826

Registration District No. 1707 ... Registered No. 6
(For use of Local Registrar)

(2) Full Name of Child George Dickson

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? yes (7) DATE OF BIRTH Jan 27 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Lahn Dickson
(9) PRESENT POSTOFFICE OF FATHER Fatrick Sc
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 22 (Years)
(12) BIRTHPLACE Laurens S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1

MOTHER.
(14) NAME BEFORE MARRIAGE Sen Rimer
(15) PRESENT POSTOFFICE OF MOTHER Fatrick Sc
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 16 (Years)
(18) BIRTHPLACE Darlington County S.C.
(19) OCCUPATION Farmer
(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 ... at ... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) Charlotte Smithson
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Jan 28 1922 (28) SM
Registrar 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.