

## (1) PLACE OF BIRTH

County of Georgetown  
 Township of Center  
 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

18674

Registration District No. 2100 Registered No. 14  
 (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 James Edgar Wright { 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 June 28, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

8) FULL NAME Jim Wright  
 9) PRESENT POSTOFFICE OF FATHER Georgetown  
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 31 (Years)  
 12) BIRTHPLACE Georgetown County  
 13) OCCUPATION Common Laborer

20) Number of children born to mother, including present birth 12

## MOTHER.

14) NAME BEFORE MARRIAGE Mariah Wharton  
 15) PRESENT POSTOFFICE OF MOTHER Georgetown  
 16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 25 (Years)  
 18) BIRTHPLACE Georgetown County  
 19) OCCUPATION House Work

21) Number of children of this mother now living, including present birth 12

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 10 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) N. E. Drayton  
 (24) State whether Physician or Midwife Midwife (25) Address of Physic or Midwife Georgetown

Given name added from a supplemental report

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

(27) Filed July 8, 1922 (28) E. O. Hatcher 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.