

MARGIN RESERVED FOR INDEXING.

WRITE 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 1.

Division of Statistics, Columbia, S. C.

Form No. 1

(1) PLACE OF BIRTH

County of Barnwell
Township of Barnwell
Inc. Town of Barnwell
City of _____

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
9350

Registration District No. 201... Registered No. 7...
(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 Louisa Mills... (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH Feb 11, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wynnan Mills
(9) PRESENT RESIDENCE OF FATHER Barnwell S.C.
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 25 (Years)
(12) BIRTHPLACE Barnwell Co. S.C.
(13) OCCUPATION Day Labour
(14) Number of children born to mother, including present birth 1

MOTHER.

(15) NAME BEFORE MARRIAGE Elizabeth Morris
(16) PRESENT RESIDENCE OF MOTHER Barnwell S.C.
(17) COLOR OR RACE negro (18) AGE AT LAST BIRTHDAY 16 (Years)
(19) BIRTHPLACE Barnwell Co. S.C.
(20) OCCUPATION housewife
(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 10 a.m....
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Julia Williams
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Barnwell S.C.

(If given name added from a supplemental report)

(26) Witness _____ (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Feb 15, 1923 (28) N. F. Kirkland 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.