

MARGIN RESERVED FOR INDEXING.
WHITE PLAINLY WRITING INK—THIS IS A REQUIREMENT SPECIFIED IN THE REGISTRATION ACT.
N. B.—In case of TWINS OR TRIPLETS, make a SEPARATE REPORT FOR EACH CHILD, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.
REGISTERS, COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Orangeburg
Township of Holly Hill
or Town of Holly Hill
or City of Holly Hill

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

File No.—For State Registrar Only
16230

Registration District No. 3609 Registered No. 69
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lillie Lane Bright

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

(3) SEX OF CHILD <u>Girl</u>	(4) Twin or Triplet? <u>No</u> To be answered only in case of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>May 17, 22</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>John Lane Bright</u>			(14) NAME BEFORE MARRIAGE <u>Sarah Council</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Holly Hill S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Holly Hill S.C.</u>	
(10) COLOR OR RACE <u>Negro</u>			(16) COLOR OR RACE <u>Negro</u>	
(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>23</u> (Years)	
(12) BIRTHPLACE <u>S.C.</u>			(18) BIRTHPLACE <u>S.C.</u>	
(13) OCCUPATION <u>Farm Hand</u>			(19) OCCUPATION <u>Farm Hand</u>	
(20) Number of children born to mother, including present birth <u>7</u>			(21) Number of children of this mother now living, including present birth <u>5</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 12 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Margaret M. Hatcher
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Holly Hill S.C.

Given name added from a supplemental report

(26) Witness M. Hesseman
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed May 27, 1922 (28) A. M. Hesseman
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.