

(1) PLACE OF BIRTH

County of CharlestonTownship of Palmettoor
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

14575

Registration District No. 1-3-0-8 Registered No. 135
(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 Samuel Jones

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

-

(5) Number in order of birth

-

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH

May 22, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Jim Jones

(9) PRESENT POSTOFFICE OF FATHER

Charleston R-3

(10) COLOR OR RACE

Col.

(11) AGE AT LAST BIRTHDAY

23
(Years)

(12) BIRTHPLACE

S. C.

(13) OCCUPATION

Labourer

MOTHER.

(14) NAME BEFORE MARRIAGE

Clarencia Smith

(15) PRESENT POSTOFFICE OF MOTHER

Charleston R-3

(16) COLOR OR RACE

Col.

(17) AGE AT LAST BIRTHDAY

20
(Years)

(18) BIRTHPLACE

S. C.

(19) OCCUPATION

Farmer

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

4

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

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature)

Sarah Ellerbe

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Indirizzo Palmetto R-3

Given name added from a supplemental report

(26) Witness

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

(27) Filed May 31, 1922(28) E. O. Casley
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.