

MARGIN RESERVED FOR BINDING.

WHITE 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 5.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH STATE OF SOUTH CAROLINA Bureau of Vital Statistics State Board of Health		File No.—For State Registrar Only 2820	
County of <u>Abbeville</u> Township of <u>Dismal</u> Inc. Town of <u>Dismal</u> City of (If birth occurs in a hospital or other institution, give name of same instead of street and number.)				Registered District No. <u>105</u> Registered No. <u>7</u> (For use of Local Registrar)	
(2) Full Name of Child <u>Henry Callahan Jamison</u> (If child is not yet named, make supplemental report as directed)					
(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>one</u>	(5) Number in order of birth <u>7</u>	(6) Sex <u>Male</u> Parents Married <u>yes</u>	(7) DATE OF BIRTH <u>Jan 18, 1922</u> (State of Month) (Day) (Year)	
FATHER.			MOTHER.		
(8) FULL NAME <u>William M Callahan Jamison</u>			(9) NAME BEFORE MARRIAGE <u>Kate Callahan</u>		
(10) PRESENT POSTOFFICE OF FATHER <u>Monro Path S.C.</u>			(11) PRESENT POSTOFFICE OF MOTHER <u>Monro Path S.C.</u>		
(12) COLOR OR RACE <u>white</u>			(13) AGE AT LAST BIRTHDAY <u>31</u> (Years)		
(14) BIRTHPLACE <u>Anderson Co</u>			(15) BIRTHPLACE <u>Abbeville Co</u>		
(16) OCCUPATION <u>Farming</u>			(17) OCCUPATION <u>House Keeping</u>		
(18) Number of children born to mother, including present birth <u>7</u>			(19) Number of children of this mother now living, including present birth <u>7</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE* (20) I hereby certify that I attended the birth of this child, who was <u>Alive</u> at <u>O. P. M.</u> on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.) (21) (Signature) <u>J. F. Thirley</u> (22) State whether Physician or Midwife <u>Physician</u> (23) Address of Physician or Midwife <u>Monro Path S.C.</u>					
Given name added from a supplemental report (24) Registrar <u>319</u>			(25) Witness (Signature of Witness necessary only when question 23 is signed by mark) (26) Filed <u>Feb 15, 1922</u> (27) <u>Lucile Humphreys</u> 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.					

State of South Carolina, Columbia, S. C.