

THIS IS A PERMANENT RECORD.
 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.

RECEIVED OF COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Richland
 Township of Richland
 or
 Inc. Town of Richland
 or
 City of Richland

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

File No.—For State Registrar Only
31831

Registration District No. 3704 Registered No. 70
 (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 Willie Mae Jones

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

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 11 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME John Jones
 (9) PRESENT POSTOFFICE OF FATHER Pickens #2
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 42
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Bessie Bearden
 (15) PRESENT POSTOFFICE OF MOTHER Pickens #2
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 17
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Domestic
 (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 11 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) John Moore
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Liberty S.C.

Given name added from a supplemental report

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

(27) Filed Sept 25 22 J. M. Gandy
 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.