

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 IN 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

County of Abbeville...Township of Romalda..or
Inc. Town of.....or
City of.....

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthNo. 105—For State Registrar Only
2607Registration District No. 105 Registered No. 7
(For use of Local Registrar)(2) Full Name of Child James Marion Phillips If child is not yet named, make supplemental report as directed

(3) SEX OR GIRL	(4) Type or Name	(5) Number in order of birth	(6) Age years months	(7) DATE OF BIRTH
Boy	To be given only in case of Twin or Triple	1st	1 year	Feb. 4 th 1923 (Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME W. R. Phillips(9) PRESENT
RESIDENCE
OF FATHER Homer Path, S.C.(10) COLOR
OR
RACE White (11) AGE AT LAST
BIRTHDAY 43
(Year)(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(14) Number of children born to
mother, including present birth Final

MOTHER.

(15) NAME BEFORE
MARRIAGE Ella Goodell(16) PRESENT
RESIDENCE
OF MOTHER Homer Path, S.C.(17) COLOR
OR
RACE White (18) AGE AT LAST
BIRTHDAY 33
(Year)(19) BIRTHPLACE S.C.(20) OCCUPATION Domestic(21) Number of children of this mother
now living, including present birth Final

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Admission at. 8 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) E. R. Goodell, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplement-
tal report(26) Witness
(Signature of Witness necessary only
when question 25 is signed by mark)(27) Signed Feb. 10, 1923 (28) Emilia Humphrey
Local RegistrarWhen 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.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.