

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 6.

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Spartanburg
 or
 Inc. Town of
 or
 City of Spartanburg (No. R. 1)

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

(2) Full Name of Child Young Jean Israel

File No.—For State Registrar Only
20253

Registration District No. 4008 Registered No. 179
 (For use of Local Registrar)

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH May 21, 19 22
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Young Israel
 (9) PRESENT POSTOFFICE OF FATHER Spartanburg R. 1 S. C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Years)
 (12) BIRTHPLACE S. C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 4

MOTHER.
 (14) NAME BEFORE MARRIAGE Elmerie Belcher
 (15) PRESENT POSTOFFICE OF MOTHER Spartanburg R. 1 S. C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26 (Years)
 (18) BIRTHPLACE S. C.
 (19) OCCUPATION Housewife
 (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 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. A. Chapman
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Whitney S. C.

Given name added from a supplemental report

L. A. Piser, M. D.
10/30/44, 19 44
 Registrar

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

(27) Filed 7-1, 19 22 (28) E. J. Parkin 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.

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