

28151

Registration District No. 180.2. Registered No. 27
(For use of Local Registrar)

(2) Full Name of Child: Warren H. Higgins If child is not yet named, make
apparent name of child and date of birth

(3) BOY OR GIRL <i>Boy</i>	(4) Tribe or Tribes <i>To be reported only in event of Tribe or Tribes</i>	(5) Number in order of birth	(6) Are Parents Married <i>Yes</i>	(7) DATE OF BIRTH <i>Sept 22, 1955</i>
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FATHER.

(1) FULL NAME Jordan Higgins

(2) PRESENT POST OFFICE OF FATHER Gold Springs

(3) COLOR Black (4) AGE AT LAST BIRTHDAY 41

(5) BIRTH PLACE Greenwood Co - SC

(6) OCCUPATION Farmer

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

MOTHER.

(14) RACE, SEX AND MARITAL STATUS *Nancy Peterson*

(15) PRESENT RESIDENCE OF MOTHER *Gold Spring*

(16) COLOR OR RACE *Negro* (17) AGE AT LAST BIRTHDAY *38*

(18) BIRTH DATE *1906*

Greenwood, Cal

(19) OCCUPATION *Housewife*

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

(22) I hereby certify that I attended the birth of this child, who was on the date above stated.

(28) (Signature) [Handwritten Signature]
 (34) State whether Physician or Midwife | (35) Address of Physician or Midwife

Given name added from a supplement-
tal report

James H. Carey
Jan. 22 1924

(28) Witness
(Signature of Witness necessary only
when question 23 is signed by mark)
(29) Photo 22, 23. (30)
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*When there was no attending physician or midwife, then the father, householder, etc., should make the report. If a child breathes even once, it must not be reported as stillborn. No report is desired of children born before the fifth month of pregnancy.