

(1) PLACE OF BIRTH

County of Field
 Township of Blair
 or
 Loc. Town of Blair D.C.
 or
 City of _____

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

Registration District No. 19.50 Registered No. 11
 (For use of Local Registrar)

(2) Full Name of Child E. W. Coleman (No. _____ St. _____ Ward _____)
 If birth occurs in a hospital or other institution, give name of same instead of street and number.
 If child is not yet named, make supplemental report as directed

(3) SEX OR GIRL 2 (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 6 1922
 To be answered only in event of Twin or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME E. W. Coleman
 (9) PRESENT POSTOFFICE OF FATHER Blair D.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 21 (Years)
 (12) BIRTHPLACE Field County
 (13) OCCUPATION Housewife
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Mathie Griffin
 (15) PRESENT POSTOFFICE OF MOTHER Blair D.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 18 (Years)
 (18) BIRTHPLACE Fairfield County
 (19) OCCUPATION Housewife
 (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 _____ nt. _____ M.
 on the date above stated. (Born alive or stillborn) Hour _____ M. or P. M.)

(23) (Signature) Sylvia Washington
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Blair D.C.

Given name added from a supplemental report? _____
 (26) Witness P. D. Jenkins
 (Signature of witness necessary only when question 23 is signed by mark)
 (27) Filed Mar. 19 1922 (28) Mrs. C. W. Tancette 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.