

Form No. 1

(1) PLACE OF BIRTH

County of Barnwell
 Township of Bennett Springs
 or
 Inc. Town of.....
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
33193

Registration District No. 503

Registered No. 1
 (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 Earnest Mathew Rozier

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

(3) BOY OR GIRL Male (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept. 17 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Gadson Rozier
 (9) PRESENT POSTOFFICE OF FATHER Dunbarton S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40 (Year)
 (12) BIRTHPLACE Dunbarton S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Virgie Widener
 (15) PRESENT POSTOFFICE OF MOTHER Dunbarton S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 35 (Year)
 (18) BIRTHPLACE Wiscen, I.C.
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 16

(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Oct. 24 1922

(28) Mrs. Edna Owens Hill
 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.

MARGIN RESERVED FOR BINDING.

WRITE 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 5.

MCGRAW HILL, COLUMBIA, N. Y.