

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.

(1) PLACE OF BIRTH

County of Alcon
Township of Chattahoochee
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
43883

Registration District No. 3501 Registered No. 23
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child James Charles Webb If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in case of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 27 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Ben Webb
(9) PRESENT POSTOFFICE OF FATHER mt Rest S.C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 24
(Year)
(12) BIRTHPLACE Macon N.C.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth two

MOTHER.
(14) NAME BEFORE MARRIAGE Essie McCall
(15) PRESENT POSTOFFICE OF MOTHER mt Rest S.C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 20
(Year)
(18) BIRTHPLACE Macon N.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alone at 5 A. M., on the date above stated. (Both alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. J. Phillips

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife mt Rest S.C.

Given name added from a supplemental report

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

(27) Filed Jan 2 1923 (28) W. R. Bunt 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 for stillbirths before the fifth month of pregnancy.