

RECEIVED
N. H. - 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.
RECEIVED OF COLUMBIA, GEORGIA, S. C.

(1) PLACE OF BIRTH

County of Saluda
Township of No. 1
or
Inc. Town of
or
City of

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

Registration District No. 3900

File No. - For State Registrar Only
32028

Registered No. 23
(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

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 16, 22
(If child is not yet named, make supplemental report as directed)

FATHER.
(8) FULL NAME Davis Jennings
(9) PRESENT POSTOFFICE OF FATHER Saluda, S. C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27
(12) BIRTHPLACE S. C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 2

MOTHER.
(14) NAME BEFORE MARRIAGE Ora Bodie
(15) PRESENT POSTOFFICE OF MOTHER Saluda S. C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26
(18) BIRTHPLACE S. C.
(19) OCCUPATION Housework
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Dr. P. M. Connor
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Batesburg 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 Sept. 25, 1922 (28) P. C. Longman 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.