

(1) PLACE OF BIRTH

County of

Township of

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

71814

Registration District No.

Registered No.

(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 Garrett*

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

(3) BOY OR GIRL? *girl*

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

(Name of Month) (Day) 191-*aug 15*

FATHER.

MOTHER.

(8) FULL NAME

Lonzo Garrett

(14) NAME BEFORE MARRIAGE

Lizz Mafo

(9) PRESENT POSTOFFICE OF FATHER

Starr SC

(15) PRESENT POSTOFFICE OF MOTHER

Starr SC

(10) COLOR OR RACE

Black

(11) AGE AT LAST BIRTHDAY

(Years) *28*

(16) COLOR OR RACE

Black

(17) AGE AT LAST BIRTHDAY

(Years) *24*

(12) BIRTHPLACE

(18) BIRTHPLACE

(13) OCCUPATION

(19) OCCUPATION

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature)

Lannie Allen

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Starr SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed

191-*Sept 1*

(28)

J. A. Jones

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.

WHILE 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.

McClay, of Columbia