

## (1) PLACE OF BIRTH

County of AikenTownship of Wicks

Inc. Town of .....

City of .....

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

34421

Registration District No. 21 Registered No. 1  
(For use of Local Registrar)

## (2) Full Name of Child

James Smith

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 11 2 13  
(Name of Month) (Day) (Year)(8) FULL NAME Elisha Smith  
FATHER(9) PRESENT POSTOFFICE OF FATHER Ridge Spring(10) COLOR OR RACE B. (11) AGE AT LAST BIRTHDAY 44 (Years)(12) BIRTHPLACE Aiken Co., S.C.(13) OCCUPATION Tann. Laborer(14) Number of children born to mother, including present birth 13(14) NAME BEFORE MARRIAGE Fattie Gaud  
MOTHER(15) PRESENT POSTOFFICE OF MOTHER Ridge Spring(16) COLOR OR RACE B. (17) AGE AT LAST BIRTHDAY 41 (Years)(18) BIRTHPLACE Aiken Co., S.C.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 11

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive (Hour A. M. or P. M.) 2 P. M.  
on the date above stated.(22) (Signature) F. J. Johnson(23) State whether Physician or Midwife Midwife(24) Address of Physician or Midwife Ridge Spring

Given name added from a supplemental report

..... 100.....

..... Registrar

(25) Witness .....  
(Signature of Witness necessary only when question 23 is signed by mark)(26) Filed Nov. 10, 1913 (27) H. E. K. ... 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.