

RECEIVED OF COLUMBIA, S. C.
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
If child is not yet named, make supplemental report as directed

(1) PLACE OF BIRTH

County of Richmond

Township of 15

or
Inc. Town of

or
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

42293

Registration District No. 15 Registered No. 58
(For use of Local Registrar)

(2) Full Name of Child

Catherine Louise Jones

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

(3) BOY OR GIRL? G

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth 1

(6) Are Parents Married? No

(7) DATE OF

BIRTH Nov 30, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE

(11) AGE AT LAST BIRTHDAY

(Years)

(12) BIRTHPLACE

(13) OCCUPATION

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

MOTHER.

(14) NAME BEFORE MARRIAGE Carrie Jones

(15) PRESENT POSTOFFICE OF MOTHER Wm. T. cells

(16) COLOR OR RACE W.B.

(17) AGE AT LAST BIRTHDAY

(Years)

(18) BIRTHPLACE Se

(19) OCCUPATION Se

(21) Number of children of this mother now living, including present birth 1

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) Mary Jones

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Danville, Va

Given name added from a supplemental report

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

(27) Filed 12 13 1922 (28) C. J. S. R. L. H. 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.