

(1) PLACE OF BIRTH

County of DillonTownship of Manning

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 1605

File No.—For State Registrar Only

34100

Registered No. 13
(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 Boy Benjamin Edwards

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 event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF

BIRTH May 23, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Benjamin Edwards(9) PRESENT POSTOFFICE OF FATHER Dillon S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 24
(Years)(12) BIRTHPLACE Marion Co. S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth Two

MOTHER.

(14) NAME BEFORE MARRIAGE Alice Bullock(15) PRESENT POSTOFFICE OF MOTHER Dillon S.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 24
(Years)(18) BIRTHPLACE Robinson Co 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 Alice at 8 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) R. R. Craig

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Dillon 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 Oct 20 19 22(28) J. B. Williams
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.

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Medium of Columbia, Columbia, S. C.