

WRITE PLAINLY, WITH LEADING INK—THIS IS A COMBINATION REGISTER, and mark the 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 8

(1) PLACE OF BIRTH

County of Florence
Township of Jeffers
or
Inc. Town of
or
City of

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

File No.—For State Registrar Only

18608

Registration District No. 707 Registered No. 43
(For use of Local Registrar)

City of (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 Richard Knight If child is not yet named, make supplemental report as directed

3 BOY OR GIRL? 4 Twin or Triplet? 5 Number in order of birth 6 Are Parents Married? 7 DATE OF BIRTH
To be answered only in event of Twins or Triplets 1 no 6/4 1922
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME
9 PRESENT POSTOFFICE OF FATHER
10 COLOR OR RACE Negro 11 AGE AT LAST BIRTHDAY
12 BIRTHPLACE
13 OCCUPATION
14 Number of children born to mother, including present birth

MOTHER.

14 NAME BEFORE MARRIAGE Julia Knight
15 PRESENT POSTOFFICE OF MOTHER Marshall St
16 COLOR OR RACE Negro 17 AGE AT LAST BIRTHDAY 16
18 BIRTHPLACE Arvinia St
19 OCCUPATION Jaime
20 Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... born ...at 3.30 A.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Franklin Smith
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed June 25 1922 (28) W. B. Davis 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.