

STATE OF SOUTH CAROLINA, COLUMBIA, S. C.
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.

(1) PLACE OF BIRTH

County of Allen & Calhoun
Township of Muscle Shoals
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

20774

Registration District No. 4.404 Registered No. 16
(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 Thelmer Aiken (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? ☒ (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH... July 10... 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Lenon Aiken
(9) PRESENT POSTOFFICE OF FATHER Martins S C
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY... 27.....
(Year)
(12) BIRTHPLACE South Car
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 3

MOTHER.
(14) NAME BEFORE MARRIAGE Rosa Aiken
(15) PRESENT POSTOFFICE OF MOTHER Martins S C
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY... 23.....
(Year)
(18) BIRTHPLACE South Car
(19) OCCUPATION House Wife
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was.... Alive..... at 8.... P.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rosa Watson

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Martins S C

Given name added from a supplemental report

Wm A. Williams
July 10... 1922
Registrar

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

(27) Filed July 20... 1922 (28) Rosa Watson
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.