

Form No. 1

(1) PLACE OF BIRTH

County of Kershaw
 Township of Shawnee
 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
43104

Registration District No. 2704 Registered No.
 (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 Thelma May Dixon If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 28 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Eddie Nelson
 (9) PRESENT POSTOFFICE OF FATHER Blaney St
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30 (Years)
 (12) BIRTHPLACE SC
 (13) OCCUPATION Farm Hand
 (20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Irene Tullman
 (15) PRESENT POSTOFFICE OF MOTHER Blaney St
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE SC
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Bessie Brown

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplement-
 tal report

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

(27) Filed Dec 31 1922 (28) Thos. M. Gaddy 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.

THIS IS A PERMANENT RECORD. 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.