

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—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.

(1) PLACE OF BIRTH				CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Anderson</u>				STATE OF SOUTH CAROLINA		178	
Township of <u>Hillmanish</u>				Bureau of Vital Statistics			
Inc. Town of <u>Robertson</u>				State Board of Health			
City of <u>Robertson</u>				Registration District No. <u>32</u>		Registered No. <u>3</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)				St. <u>St.</u>		Ward <u>Ward</u>	
(2) Full Name of Child <u>Lucia Amanda</u>				(If child is not yet named, make supplemental report as directed)			
(3) BOY OR GIRL <u>Girl</u>		(4) Twin or Triplet <u>No</u>		(5) Number in order of birth <u>3</u>		(6) Are Parents Married? <u>Yes</u>	
(7) DATE OF BIRTH <u>Jan 2 1922</u>		(8) NAME BEFORE MARRIAGE <u>Barnie May Williams</u>		(9) PRESENT POSTOFFICE OF MOTHER <u>Pager</u>		(10) AGE AT LAST BIRTHDAY <u>26</u>	
(11) COLOR OR RACE <u>White</u>		(12) BIRTHPLACE <u>Anderson County</u>		(13) OCCUPATION <u>Mill Work</u>		(14) COLOR OR RACE <u>White</u>	
(15) BIRTHPLACE <u>Anderson County</u>		(16) OCCUPATION <u>Domestic</u>		(17) Number of children of this mother now living, including present birth <u>3</u>			
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.							
(22) I hereby certify that I attended the birth of this child, who was <u>at 11.4 M.</u> at <u>11.4 M.</u> on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)							
(23) (Signature) <u>W. B. C. C. C.</u>				(24) State whether Physician or Midwife <u>Physician</u>			
(25) Address of Physician or Midwife <u>Pager</u>							
Given name added from a supplemental report:				(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)			
				(27) Filed <u>Jan 6 1922</u> (28) <u>W. B. C. C. C.</u>			
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.							

MARCH OF COLUMBIA, COLUMBIA, S. C.