

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.

MOBILE OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Pickens S.C.
Township of Liberty
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

36093

Registration District No. 3705

Registered No. 130
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Clark Crumpton

(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 20 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Reuben Crumpton

MOTHER. Baker
(14) NAME BEFORE MARRIAGE Louise Beale

(9) PRESENT POSTOFFICE OF FATHER Liberty

(15) PRESENT POSTOFFICE OF MOTHER Liberty, S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 25 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21 (Years)

(12) BIRTHPLACE Pickens County, S.C.

(18) BIRTHPLACE Pickens County, S.C.

(13) OCCUPATION Farmer

(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 3

(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 born alive at 11:00 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Belle J. Peterson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Mobile, Ala.

Given name added from a supplemental report

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

(27) Filed Oct 25 1922 (28) John N. Boyce 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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