

MARGIN RESERVED FOR FINDING.  
WRITE IN PLAIN, WITH ENLARGING INK. THIS IS A PERMANENT RECORD.  
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 Cherokee  
Township of Goodville  
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

37683

Registration District No. 1002

Registered No. 255  
(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 Robert Wilkins Kirby (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 3 (6) Are Parents Married? yes (7) DATE OF BIRTH May 18 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Alonzo Washington Kirby

(9) PRESENT POSTOFFICE OF FATHER Wilkesville S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)

(12) BIRTHPLACE Harrisetta N.C.

(13) OCCUPATION Farming

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

MOTHER.

(14) NAME BEFORE MARRIAGE Wilkins Edna Cornelia

(15) PRESENT POSTOFFICE OF MOTHER Wilkesville S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE Union Co

(19) OCCUPATION House Keeping

(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 6.30 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Lula Dye Wilkesville (24) State whether Physician or Midwife (25) Address of Physician or Midwife S.C.

Given name added from a supplemental report

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

Sam J. Strain 1922 Registrar

(27) Filed Nov 20 1924 (28) Sam J. Strain 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.