

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, WITH LEADING 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.

MECHANICAL COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Sumter
 Township of 11
 or
 Inc. Town of Osceola, SC
 or
 City of Osceola, SC

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only
20342

Registration District No. Registered No. 124
 (For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child Ada Linn

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 Jan 5 1922
 (Give of Month) (Day) (Year)

FATHER.

8) FULL NAME Willie Hunter
 9) PRESENT POSTOFFICE OF FATHER Osceola SC
 10) COLOR OR RACE Black 11) AGE AT LAST BIRTHDAY 38
 (Years) 12) BIRTHPLACE Clarendon Co.
 13) OCCUPATION Farm Hand
 20) Number of children born to mother, including present birth 8

MOTHER.

14) NAME BEFORE MARRIAGE Ada Linn
 15) PRESENT POSTOFFICE OF MOTHER Osceola SC
 16) COLOR OR RACE Black 17) AGE AT LAST BIRTHDAY 37
 (Years) 18) BIRTHPLACE Clarendon Co.
 19) OCCUPATION House wife & laborer
 21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at 1 P.M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. F. Cash

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 19 (28) 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.