

(1) PLACE OF BIRTH

County of Lexington
 Township of

or
 Inc. Town of

City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

31179

Registration District No. 3109 Registered No. 90
 (For use of Local Registrar)
 City of (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 { 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> <small>To be answered only in case of twins or triplets</small> | (5) Number in order of birth | (6) Are Parents Married? <u>Yes</u> | (7) DATE OF BIRTH <u>Sept. 6, 22</u> <small>(Name of Month) (Day) (Year)</small> |
| FATHER | | | MOTHER | |
| (8) FULL NAME <u>John Risinger</u> | | | (14) NAME BEFORE MARRIAGE <u>Emma Roland</u> | |
| (9) PRESENT POSTOFFICE OF FATHER <u>Lexington St.</u> | | | (15) PRESENT POSTOFFICE OF MOTHER <u>Lexington St.</u> | |
| (10) COLOR OR RACE <u>White</u> | (11) AGE AT LAST BIRTHDAY <u>46</u> <small>(Years)</small> | (16) COLOR OR RACE <u>White</u> | (17) AGE AT LAST BIRTHDAY <u>36</u> <small>(Years)</small> | |
| (12) BIRTHPLACE <u>Lex Co</u> | | | (18) BIRTHPLACE <u>Lex Co</u> | |
| (13) OCCUPATION <u>Mill Operative</u> | | | (19) OCCUPATION <u>Domestic</u> | |
| (20) Number of children born to mother, including present birth <u>5</u> | | | (21) Number of children of this mother now living, including present birth <u>4</u> | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) [Signature]
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Lexington

Given name added from a supplemental report

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

(27) Filed Sept 22 191... (28) Mrs. C. E. Felt 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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Local Registrar