

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 IN CASE OF TWINNING OR TRIPLETTING USE A SEPARATE BLANK FOR EACH CHILD, and make the
 registration, No. 1, THIS OFFICE, No. 2, etc., in question 6.
 Record of Children, continued, p. 6.

(1) PLACE OF BIRTH

County of Orangeburg
 Township of New Hope
 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

2211

Registration District No..... Registered No.....
 (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 Joley Murray

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 3
 To be answered only in case of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Jan. 24, 1924
 (State of Month) (Day) (Year)

FATHER.

(8) FULL NAME Arthur Murray

(9) PRESENT POSTOFFICE OF FATHER Romana

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 34
 (Years)

(12) BIRTHPLACE Ortg Co

(13) OCCUPATION Farm Laborer

(14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Ellen Whitfield

(15) PRESENT POSTOFFICE OF MOTHER Romana

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23
 (Years)

(18) BIRTHPLACE Orangeburg Co.

(19) OCCUPATION Farm Laborer

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alma at 5:30 A.M.
 on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) Octavio R. R.

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Romana, etc.

Given name added from a supplemental report

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

(27) Filed 1/28 19 24 (28) A. J. Hayden
 Registrar 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.