

WRITE PLAINLY, WITH UNFADING 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		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Laurens</u>		STATE OF SOUTH CAROLINA		35231	
Township of <u>Dial</u>		Bureau of Vital Statistics			
Inc. Town of		State Board of Health			
City of		Registration District No. <u>2201</u>		Registered No. <u>97</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. St.; Ward)			
(2) Full Name of Child <u>John Berry Jr.</u>		If child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet	(5) Number in order of birth	(6) Sex <u>yes</u>	(7) DATE OF BIRTH <u>Oct. 11, 22</u>	
To be answered only in case of Twin or Triplet		(Name of Month) (Day) (Year)			
FATHER.			MOTHER.		
(8) FULL NAME <u>John Berry</u>			(14) NAME BEFORE MARRIAGE <u>Amy Osborne</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Cwings</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Cwings</u>		
(10) COLOR OR RACE <u>Black</u>			(16) COLOR OR RACE <u>Black</u>		
(11) AGE AT LAST BIRTHDAY <u>36</u>			(17) AGE AT LAST BIRTHDAY <u>28</u>		
(12) BIRTHPLACE			(18) BIRTHPLACE <u>Laurens County</u>		
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Farmer</u>		
(20) Number of children born to mother, including present birth <u>6</u>			(21) Number of children of this mother now living, including present birth <u>5</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was <u>alive</u> at <u>1 A.</u> M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>Anna Spurgeon Midwife, Cwings, S.C.</u>					
(24) State whether Physician or Midwife (25) Address of Physician or Midwife					
Given name added from a supplemental report			(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)		
18 Registrar			(27) Filed <u>Nov 11 1922</u> (28) <u>W. E. Mahan</u> 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.