

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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 4.

(1) PLACE OF BIRTH

County of York  
 Township of Price  
 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

2782

Registration District No. 4408

Registered No. 4  
 (For use of Local Registrar)

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

(2) Full Name of Child Charles Murray

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 \_\_\_\_\_ (6) Are Parents Married? No (7) DATE OF BIRTH Jan 3 1922  
 (Month) (Day) (Year)

FATHER  
 (8) FULL NAME Lawrence Thompson  
 (9) PRESENT POSTOFFICE OF FATHER York Co S 7  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 35 (Years)  
 (12) BIRTHPLACE York Co  
 (13) OCCUPATION Farm

MOTHER  
 (14) NAME BEFORE MARRIAGE Alma Murray  
 (15) PRESENT POSTOFFICE OF MOTHER York S Co 7  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 35 (Years)  
 (18) BIRTHPLACE York Co  
 (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 6 (21) Number of children of this mother now living, born \_\_\_\_\_

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) James H. Barron  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife York S Co

Given name added from a supplemental report

(26) Witness (Signature of witness necessary only when question 23 is signed by mark)  
 (27) Filed Jan 4 1922 (28) James H. Barron 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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