

MARGIN RESERVED FOR INDEXING.

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. TELL OTHERS, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

180

County of Anderson

Township of Williamston

Inc. Town of Robert

Registration District No. 32

Registered No. 4

(For use of Local Registrar)

City of Robert (No. 32 St. 32 Ward 32)

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

(2) Full Name of Child Not named

(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 2

(6) Are Parents Married? yes

(7) DATE OF BIRTH Jan 6 19 22

(Name of Month) (Day) (Year)

To be answered only in case of Twins or Triplets

FATHER.

(8) FULL NAME Harold Mcclamb

(9) PRESENT POSTOFFICE OF FATHER Robert So

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 23 (Years)

(12) BIRTHPLACE Greenville S.C.

(13) OCCUPATION Mill work

(14) NAME BEFORE MARRIAGE Ruth Hall

(15) PRESENT POSTOFFICE OF MOTHER Robert So

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 21 (Years)

(18) BIRTHPLACE Ga

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 2

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

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

on the date above stated.

(23) (Signature) W. E. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Robert

Given name added from a supplemental report

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

(27) Filed Feb 5 19 22 (28) W. E. Smith 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.

MADE IN COLUMBIA, S. C.