

(1) PLACE OF BIRTH

County of Anderson
 Township of Williamston
 or
 Inc. Town of Rezer
 or
 City of _____

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

12765

Registration District No. 38 Registered No. 64

(For use of Local Registrar)

(2) Full Name of Child Sarah Jane Jameson (No. _____ St. _____ Ward _____)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(If child is not yet named, make supplemental report as directed)

3. SEX OF CHILD Female 4. Twin or Triplet? No 5. Number in order of birth 6 6. Age yes 7. DATE OF BIRTH May 26, 1913
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

8. FULL NAME Sam Jameson
 9. PRESENT POSTOFFICE OF FATHER Pelzer So
 10. COLOR OR RACE White 11. AGE AT LAST BIRTHDAY 43 (Year)
 12. BIRTHPLACE Oconee County
 13. OCCUPATION Mill Work

MOTHER.

14. NAME BEFORE MARRIAGE Fannie May Bolden
 15. PRESENT POSTOFFICE OF MOTHER Pelzer So
 16. COLOR OR RACE White 17. AGE AT LAST BIRTHDAY 36 (Year)
 18. BIRTHPLACE Aberville County
 19. OCCUPATION Domestic
 20. Number of children of this mother now living, including present birth 6

21. Number of children born to mother, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10:45 P. M.,
 on the date above stated. (born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) W. R. Dyer

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Pelzer So

Given name added from a supplemental report

(26) Witness

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

(27) Filed June 7, 1913(28) W. R. Dyer

Local Registrar.

19 _____ 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.