

(1) PLACE OF BIRTH

County of LeahmanTownship of Amelia

or

Inc. Town of

or

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. - For State Registrar Only

20025

Registration District No. 822Registered No. 77
(For use of Local Registrar)(2) Full Name of Child Mary Jones

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

(3) BOY OR GIRL <u>girl</u>	(4) Date <u>June</u> To be answered only in event of Twin or Triplet	(5) Number in order of birth <u>1st</u>	(6) Are Parents Married <u>yes</u>	(7) DATE OF BIRTH <u>June 23</u> (Month of Year) (Day) (Year)
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FATHER

(8) FULL NAME Edmond Jones(9) PRESENT POSTOFFICE OF FATHER Rt. 2, Heath Lane(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22 (Year)(12) BIRTHPLACE South Carolina(13) OCCUPATION Farm work(20) Number of children born to mother, including present birth 3

MOTHER

(14) NAME BEFORE MARRIAGE Mary E. Eason(15) PRESENT POSTOFFICE OF MOTHER Rt. 2, Heath Lane(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 22 (Year)(18) BIRTHPLACE South Carolina(19) OCCUPATION Farm work(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 alive at 1 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Lola E. Eason(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Rt. 2, Heath Lane

Given name added from a supplemental report

(26) Witness A. R. Eason
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Aug 26 1922 (28) A. R. Eason 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.