

(1) PLACE OF BIRTH

County of Newberry
 Township of # 9
 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
35767

Registration District No. 3410 Registered No. 109
 (For use of Local Registrar)

(No. St. Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Oct 23</u> 19 <u>22</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Russell Jones</u>			(14) NAME BEFORE MARRIAGE <u>Ernester Gallman</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Prosperity</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Prosperity SC</u>	
(10) COLOR OR RACE <u>Black</u>	(11) AGE AT LAST BIRTHDAY <u>31</u> (Year)	(16) COLOR OR RACE <u>Black</u>	(17) AGE AT LAST BIRTHDAY <u>31</u> (Year)	
(12) BIRTHPLACE <u>Newberry Co</u>			(18) BIRTHPLACE <u>Newberry Co.</u>	
(13) OCCUPATION <u>Farming</u>			(19) OCCUPATION <u>Farm hand</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>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) J. J. B. Buchanan M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Prosperity, SC

Given name added from a supplemental report

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

(27) Filed Nov 9 1922 (28) W. T. Gibson 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.