

(1) PLACE OF BIRTH

County of ChesterfieldTownship of Peleeor
Inc. Town ofor
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

41719

Registration District No. Registered No.

(For use of Local Registrar)

(2) Full Name of Child Catherine Maxima Jones { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL girl (4) Twin or Triplet? ☒ (5) Number in order of birth X (6) Are Parents Married? Yes (7) DATE OF BIRTH June 21, 1922
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME David J. Jones(14) NAME BEFORE MARRIAGE Rebecca Wilkes(9) PRESENT POSTOFFICE OF FATHER So City Hill, Route 1(15) PRESENT POSTOFFICE OF MOTHER So City Hill, Route 1(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33 (Years)(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)(12) BIRTHPLACE Chesterfield Co.(18) BIRTHPLACE Chesterfield Co.(13) OCCUPATION Farmer(19) OCCUPATION House wife & help(20) Number of children born to mother, including present birth { 4th }(21) Number of children of this mother now living, including present birth { 3 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. B. Gregg, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician So City Hill, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

Registrar

(27) Filed 191 (28) 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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