

(1) PLACE OF BIRTH

County of Darlington

Township of

OF
Inc. Town of Norrisville

OF
City of

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

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

File No. — For State Registrar Only
3557

Registration District No. 15 B Registered No. 16
(For use of Local Registrar)

(2) Full Name of Child Marion Sue Jones

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

(3) BOY OR GIRL Girl

(4) Twin or Triplet? To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Jan 26 1920
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James S. Jones

(9) PRESENT POSTOFFICE OF FATHER Norrisville S.C.

(10) COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 39

(12) BIRTHPLACE Cowley La.

(13) OCCUPATION Caron Buyer

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Sarah K. Anseling

(15) PRESENT POSTOFFICE OF MOTHER Norrisville S.C.

(16) COLOR OR RACE W. (17) AGE AT LAST BIRTHDAY 29

(18) BIRTHPLACE Stua Ga

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born at 3:20 M., on the date above stated. (Born alive or stillborn) Hour A. M. or P. M.)

(23) (Signature) W. G. Linton

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Norrisville S.C.

Given name added from a supplemental report

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

(27) Date July 27 1923 (28) W. G. Linton 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 sixth month of pregnancy.

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Division of Columbia, Columbia, S. C.