

(1) PLACE OF BIRTH

County of HamptonTownship of Watts

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

30625

Registration District No. .... Registered No. 121 ....  
(For use of Local Registrar)City of ..... (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 Junior Robinson If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept. 22, 22  
(Name of Month) (Day) (Year)

Is to be answered only in event of Twins or Triplets

FATHER. MOTHER.

(8) FULL NAME Tom Robinson (14) NAME BEFORE MARRIAGE Loy Bashick(9) PRESENT POSTOFFICE OF FATHER May, S.C. (15) PRESENT POSTOFFICE OF MOTHER May, S.C.(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 23 (16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 19  
(Years) (Years)(12) BIRTHPLACE Hampton Co (18) BIRTHPLACE Hampton Co(13) OCCUPATION Farming (19) OCCUPATION Housewife(20) Number of children born to mother, including present birth 1 (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 Alive at 11 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Hampton (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife May, S.C.

Given name added from a supplemental report

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

(27) Filed Sept. 22, 22 (28) H.E. Dickinson 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.

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.

W.F. Collins L.R.