

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Newberry
Township of 11
or
Inc. Town of 11
or
City of 11

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

File No.—For State Registrar Only

5103

Registration District No. 3404

Registered No. 12
(For use of Local Registrar)

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

(2) Full Name of Child

John Alfred Bimbrich

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Jan 18 22

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John Bimbrich

(9) PRESENT POSTOFFICE OF FATHER

Sumner St

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

31

(Year)

(12) BIRTHPLACE

Newberry Co

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Eloise Miller

(15) PRESENT POSTOFFICE OF MOTHER

Pimaria

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

28

(Year)

(18) BIRTHPLACE

Lexington Co.

(19) OCCUPATION

Domestic

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

One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

J. J. P. Miller

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Sumner St

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Jan 19 1922

(28)

R. J. Johnson
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.