

Form No. 1

(1) PLACE OF BIRTH

County of Hampton
 Township of Lawson
 or
 Inc. Town of
 or
 City of

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

No. for State Registrar's Office
40911

Registration District No. 1401 Registered No. 8
 (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 Jefferson Holmes If child is not yet named, make supplemental report as directed

3 SEX OF CHILD Boy 4 Type or Triplet To be covered only in event of Twin or Triplet 5 Age of Child at Birth no 6 DATE OF BIRTH Dec 10 1923
 (Month) (Day) (Year)

FATHER.

7 FULL NAME John Jefferson Holmes
 8 PRESENT RESIDENCE OF FATHER Hampton
 9 COLOR OR RACE Black 10 AGE AT LAST BIRTHDAY 20 (Years)
 11 BIRTHPLACE S.C.
 12 OCCUPATION Farmer

MOTHER.

13 NAME BEFORE MARRIAGE Nancy Holmes
 14 PRESENT RESIDENCE OF MOTHER Hampton S.C. R.F. 5th
 15 COLOR OR RACE Black 16 AGE AT LAST BIRTHDAY 20 (Years)
 17 BIRTHPLACE S.C.
 18 OCCUPATION Farmer

19 Number of children born to mother, including present birth 1 20 Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive at 9 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) John C. Richardson
 (23) State whether Physician or Midwife Physician Address of Physician or Midwife Hampton S.C. R.F. 5th

Given name and address of person to whom this report is to be sent

(24) Witness John C. Richardson (Signature of Witness necessary only when question 23 is signed by mark)

(25) Date Dec. 18 1923 (26) John C. Richardson Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child is reported as stillborn. No report is desired of stillbirths before the sixth month of pregnancy.