

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 Greenville
 Township of Chick Spring
 or
 Inc. Town of.....
 or
 City of Chick Spring Sanatorium

(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

4333

Registration District No. 2204

Registered No. 27
(For use of Local Registrar)(2) Full Name of Child Benjamin Bruce Coleman

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

(3) BOY OR GIRL Boy (4) Twin or Triplet Twin (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH February 15, 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Mrs. Samuel Lewis Coleman(9) PRESENT POSTOFFICE OF FATHER Fountain Dam, SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 44 (Year)(12) BIRTHPLACE South Carolina(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 15

MOTHER.

(14) NAME BEFORE MARRIAGE Mrs. Carrie Sprance(15) PRESENT POSTOFFICE OF MOTHER Fountain Dam, S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 38 (Year)(18) BIRTHPLACE South Carolina(19) OCCUPATION Housekeeping(21) Number of children of this mother now living, including present birth 15

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Now alive at 7 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) B. B. Steady M.D.

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

Given name added from a supplemental report

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

(27) Filed Mar 11, 1922 (28) F. J. James 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.