

(1) PLACE OF BIRTH

County of Dillon
 Township of Hillsboro
 or
 Inc. Town of
 or
 City of

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

File No.—For State Registrar Only
42088

Registration District No. 1603 Registered No. 240
 (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 J. J. Campbell 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 Oct 9, 1922
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Curtis Campbell

(9) PRESENT POSTOFFICE OF FATHER Fork SC

(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 26
 (Years)

(12) BIRTHPLACE SC

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Mamie Smith

(15) PRESENT POSTOFFICE OF MOTHER Fork SC

(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 20
 (Years)

(18) BIRTHPLACE SC

(19) OCCUPATION Field hand

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 49 M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Adal Evans
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Fork SC

Given name added from a supplemental report

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

(27) Filed Dec 30, 1922 (28) N. N. Salsfield
 Registrar 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.