

County of Georgetown  
Township of #12  
or  
Inc. Town of.....  
or  
City of .....

**STATE OF SOUTH CAROLINA**  
**Bureau of Vital Statistics**  
**State Board of Health**

18679

Registration District No. 22 Registered No. 22  
(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 Shelma Jayroe { If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? <i>Girl</i>	4) Twin or Triplet? <i>No</i>	5) Number in order of birth <i>1</i>	6) Are Parents Married? <i>Yes</i>	7) DATE OF BIRTH <i>June 7 22</i> (Name of Month) (Day) (Year)
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FATHER.

8) FULL NAME *J. M. Jayree*

9) PRESENT POSTOFFICE OF FATHER *Georgetown, S.C.*

10) COLOR OR RACE *N.* (11) AGE AT LAST BIRTHDAY *40* (Years)

12) BIRTHPLACE *Sampit, S.C.*

13. OCCUPATION *Carving*

14) Number of children born to mother, including present birth *10*

MOTHER.

(14) NAME BEFORE MARRIAGE *Stanah Finkler*

(15) PRESENT POSTOFFICE OF MOTHER *Georgetown, D.C.*

(16) COLOR OR RACE *W.* (17) AGE AT LAST BIRTHDAY *25*  
(Years)

(18) BIRTHPLACE *Berkeley Co., D.C.*

(19) OCCUPATION *Housewife*

(21) Number of children of this mother now living, including present birth *3*

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

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

(23) (Signature) Dr. James L. Moore  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(28) Witness .....  
(Signature of Witness necessary only  
when question 21 is signed by mark)

(27) Filed June 14, 1922 (28) A. J. Dalton 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.