

(1) PLACE OF BIRTH

County of

Newberry

Township of

8

In Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No.

3406

No. 1. - For State Registrar
36955Registered No. 35
(For use of Local Registrar)

(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

Cleothous Jackson

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

(3) SEX OF CHILD

Boy

(4) Type or Figure

To be covered only in case of Type or Figure

(5) Number in order of birth

(6) Are there twins

yes

(7) DATE OF BIRTH

Oct 3 1933

(Name of Month) (Day) (Year)

FATHER

(8) NAME BEFORE MARRIAGE

Mance L. Jackson

(9) PRESENT ADDRESS OF FATHER

Newberry R 4

(10) COLOR OF FATHER

B

(11) AGE AT LAST BIRTHDAY

37

(12) BIRTHPLACE

South Carolina

(13) OCCUPATION

Farming

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

9

MOTHER

(14) NAME BEFORE MARRIAGE

Inez Gallman

(15) PRESENT ADDRESS OF MOTHER

Newberry R 4

(16) COLOR OF MOTHER

B

(17) AGE AT LAST BIRTHDAY

34

(18) BIRTHPLACE

South Carolina

(19) OCCUPATION

Farm help

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

9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was

born alive on the date above stated.

(22) (Signature)

Lou Jackson

(23) State whether Physician or Midwife

Midwife

(24) Address of Physician or Midwife

Newberry

Given name added from a supplemental report

(25) Witness

(Signature of Witness necessary only when question 25 is signed by mark)

(26) Filed

Dec 10 1933

(27) Local Registrar

19 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.