

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 Aiken
Township of James Path

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

20933

In Town of Registration District No. 307 Registered No. 90
(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 Jessie Beebe { If child is not yet named, make supplemental report as directed

3) SEX OR SEX?	(4) Twin or triplet? <small>to be answered only in case of twins or triplets</small>	(5) Number in order of birth	(6) Are Parents Married? <u>2</u>	(7) DATE OF BIRTH <u>July 18, 1922</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.				MOTHER.
8) FULL NAME <u>Stoner Harris</u>				(14) NAME BEFORE MARRIAGE <u>Annice Beebe</u>
9) PRESENT POSTOFFICE OF FATHER <u>James Path</u>				(15) PRESENT POSTOFFICE OF MOTHER <u>James Path</u>
10) COLOR OR RACE <u>black</u>		(11) AGE AT LAST BIRTHDAY <u>20</u> <small>(Years)</small>	(16) COLOR OR RACE <u>black</u>	(17) AGE AT LAST BIRTHDAY <u>18</u> <small>(Years)</small>
12) BIRTHPLACE <u>S. C.</u>			18) BIRTHPLACE <u>S. C.</u>	
13) OCCUPATION <u>Farmer</u>			19) OCCUPATION <u>Dom</u>	
20) Number of children born to mother, including present birth <u>1</u>			21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 8 A. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Charlotte Beebe

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

Given name added from a supplement-
al report

191....

Registrar

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

(27) Date July 31, 1922 (28) Jessie Williams
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
24th month of pregnancy.

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.