

WHITE PLAINLY, WITH EXPANDING INK—FILL IN A PREPARED RECORD, AND MARK THE  
N. B.—In case of living or stillborn child, use a PREPARED BLANK FOR EACH CHILD, and MARK THE  
FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.  
BUREAU OF VITAL STATISTICS, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Orange  
Township of Westminster  
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  
39567

Registration District No. 3505

Registered No. 161  
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Camilus Davis

(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 8 (6) Are Parents Married? yes (7) DATE OF BIRTH November 5, 1922  
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Daniel Davis

(14) NAME BEFORE MARRIAGE Paisy Davis

(9) PRESENT POSTOFFICE OF FATHER Westminster S. C.

(15) PRESENT POSTOFFICE OF MOTHER Westminster S. C.

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 41 (Years)

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 36 (Years)

(12) BIRTHPLACE Westminster S. C.

(18) BIRTHPLACE Westminster S. C.

(13) OCCUPATION Public Works

(19) OCCUPATION House of work

(20) Number of children born to mother, including present birth 8

(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born a live at 12 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Susie Williams midwife

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Westminster S. C.

Given name added from a supplemental report

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

(27) Filed Nov 16 1922 (28) 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.