

## (1) PLACE OF BIRTH

County of FlorenceTownship of Lane Bay

or

Inc. Town of

or

City of

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

4165

Registration District No. 2074 Registered No. 1  
(For use of Local Registrar)

## 2) Full Name of Child

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

3) BOY OR GIRL

Male

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of twins or triplets

(6) Are Parents Married?

(7) DATE OF BIRTH Feb 22 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Robert Perkins

(9) PRESENT POST OFFICE OF FATHER

Barnwellburn SC

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

38 (Years)

(12) BIRTHPLACE

Florence SC

(13) OCCUPATION

Farmer

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

10

## MOTHER.

(14) NAME BEFORE MARRIAGE

Archie Thompson

(15) PRESENT POST OFFICE OF MOTHER

Sumner

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

35 (Years)

(18) BIRTHPLACE

(19) OCCUPATION

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

7

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

William H. Hill

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Barnwellburn SC

Given name added from a supplemental report

101

Registrar

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed

Feb 23 1922

(28)

W. C. Hill

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.

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