

When on trip let's 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 Richmond  
Township of Center  
or  
Inc. Town of .....  
or  
City of Eugene (No. 7 St.; ..... Ward)  
(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  
**16522**

Registration District No. 3807 Registered No. 28  
(For use of Local Registrar)

(2) Full Name of Child Eugene H. Jacobs (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 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH May 12 1922  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME Eugene H. Jacobs  
(9) PRESENT POSTOFFICE OF FATHER Lykesburg  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 27 (Year)  
(12) BIRTHPLACE Bradley Co. S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 2

MOTHER  
(14) NAME BEFORE MARRIAGE Jose M. Wicks  
(15) PRESENT POSTOFFICE OF MOTHER Lykesburg  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 17 (Year)  
(18) BIRTHPLACE Bradley Co. S.C.  
(19) OCCUPATION Home Wife  
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:30 M., on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)

(23) (Signature) Isaac Jacobs  
(24) State whether Physician or Midwife Midwife Address of Physician or Midwife Lykesburg S.C.

Given name added from a supplemental report

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

(27) Filed Apr 14 1922 (28) A. B. C. Hall 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.