

MARGIN RESERVED FOR BINDING.
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 make the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of *Sumter*

Township of *Sumter*

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

32454

Registration District No. *4164* Registered No. *115*
(For use of Local Registrar)

(2) Full Name of Child *Johnny Rogers*

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 *1* (6) Are Parents Married? *Yes* (7) DATE OF BIRTH *Sept 17 22*
(Name of Month) (Day) (Year)

FATHER

3) FULL NAME *Harry Rogers*

5) PRESENT POSTOFFICE OF FATHER *Sumter Co.*

(10) COLOR OR RACE *blk* (11) AGE AT LAST BIRTHDAY *27*
(Years)

(12) BIRTHPLACE *Sumter County*

(13) OCCUPATION *Farmer*

(20) Number of children born to mother, including present birth *2nd*

MOTHER

(14) NAME BEFORE MARRIAGE *Moody Meyer*

(15) PRESENT POSTOFFICE OF MOTHER *Sumter Co.*

(16) COLOR OR RACE *blk* (17) AGE AT LAST BIRTHDAY *18*
(Years)

(18) BIRTHPLACE *Sumter Co.*

(19) OCCUPATION *Housewife*

(21) Number of children of this mother now living, including present birth *1st*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was *alive* at *8:30 A.M.* on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *Max + Pearson*

(24) State whether Physician or Midwife *Midwife* (25) Address of Physician or Midwife *Sumter Co.*

Given name added from a supplemental report

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

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(27) Filed *Sept 25 22* (28) *James Pearson* 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.