

MARGIN RESERVED FOR BINDING.

WHITE 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 Newberry  
 Township of .....  
 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

23258

Registration District No. 34.10 Registered No. 32  
 (For use of Local Registrar)

(No. Wilson St.; ..... Ward)

(2) Full Name of Child Willie Clappins (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? No (7) DATE OF BIRTH April 9 1922  
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Louise Clappins  
 (9) PRESENT POSTOFFICE OF FATHER Newberry S.C.  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 25 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Louise Wilson  
 (15) PRESENT POSTOFFICE OF MOTHER Newberry S.C.  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 23 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION Farm Helper  
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Clara Cannon  
 (24) State whether Physician or Midwife mid wife (25) Address of Physician or Midwife Newberry S.C.

Given name added from a supplemental report  
 .....  
 ..... 19 .....  
 Registrar

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed July 11 1922 (28) Clara S. Ruff 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.