

NOTE: IN CASE OF TWINS OR TRIPLETS, THIS IS A PERMANENT RECORD. 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 Sumter  
Township of Middleton  
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  
**24065**

Registration District No. 4103 Registered No. 39  
(For use of Local Registrar)

(2) Full Name of Child Henry Alden (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL <u>boy</u>	(4) Twin or Triplet? To be answered only in case of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>June 22</u> (Name of Month) (Day) (Year)
-------------------------------	--	------------------------------	--	---

FATHER		MOTHER	
(8) FULL NAME <u>Henry Alden</u>	(14) NAME BEFORE MARRIAGE <u>Carrie Brown</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Wedgefield</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Wedgefield</u>
(10) COLOR OR RACE <u>Col</u>	(11) AGE AT LAST BIRTHDAY <u>30</u> (Years)	(16) COLOR OR RACE <u>Col</u>	(17) AGE AT LAST BIRTHDAY <u>31</u> (Years)
(12) BIRTHPLACE <u>SC</u>	(18) BIRTHPLACE <u>SC</u>	(13) OCCUPATION <u>grocer</u>	(19) OCCUPATION <u>Home Maker</u>
(20) Number of children born to mother, including present birth <u>7</u>	(21) Number of children of this mother now living, including present birth <u>4</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature)  
(24) Whether Physician or Midwife  
(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed June 30 1922 (28) M. L. Scott 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.