

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
N. B.—In case of 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 No 8

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

43836

Registration District No. 3406

Registered No. 114
(For use of Local Registrar)

(2) Full Name of Child Albert Warts

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

(3) BOY OR GIRL? boy

(4) Twin or Triplet? —

(5) Number in order of birth —

(6) Are Parents Married? no

(7) DATE OF BIRTH Dec 15, 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Albert Jeter

(9) PRESENT POSTOFFICE OF FATHER Newberry, S. C.

(10) COLOR OR RACE black

(12) BIRTHPLACE S. Car.

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Cussie Warts

(15) PRESENT POSTOFFICE OF MOTHER Newberry, S. C.

(16) COLOR OR RACE black

(18) BIRTHPLACE S. Car.

(19) OCCUPATION Farmer help

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 11 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) John K. Wicker

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Newberry, S. C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed Jan 10, 1923

(28) W. L. Bonlowe 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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