

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 mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

Form No. 1

(1) PLACE OF BIRTH

County of Sumter
 Township of Manchester
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

32438

Registration District No. 4/101... Registered No. 14.....
 (For use of Local Registrar)

(No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Henry Benjamin Spann {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. 11, 1922
 (Name of Month) (Day) (Year)

FATHER
 8) FULL NAME David P. Spann
 9) PRESENT POSTOFFICE OF FATHER Wedgfield S. B. #1
 10) COLOR OR RACE Col. 11) AGE AT LAST BIRTHDAY 31 (Years)
 12) BIRTHPLACE Sumter County
 13) OCCUPATION Farmer

MOTHER
 14) NAME BEFORE MARRIAGE Margaret Gary
 15) PRESENT POSTOFFICE OF MOTHER Wedgfield #1
 16) COLOR OR RACE Col. 17) AGE AT LAST BIRTHDAY 30 (Years)
 18) BIRTHPLACE Sumter County
 19) OCCUPATION Field Hand

20) Number of children born to mother, including present birth 4 21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 5 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarah Walker
 (24) State whether Physician or Midwife Midwife Address of Physician or Midwife Wedgfield #1

Given name added from a supplemental report

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

(27) Filed Sept 16, 1922 (23) F. M. Coulter 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.