

(1) PLACE OF BIRTH

County of Fairfield

Township of

OF

Inc. Town of Wet

OF

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

3731

Registration District No. 1901 Registered No. 11

(For use of Local Registrar)

(2) Full Name of Child Coronation Lister

(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 Feb. 10, 1923
(Name of Month) (Day) (Year)

FATHER.

9) FULL NAME John Lister10) PRESENT POSTOFFICE OF FATHER Black Bluff11) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)12) BIRTHPLACE South Carolina13) OCCUPATION Farmer20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Lister(15) PRESENT POSTOFFICE OF MOTHER Black Bluff(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE South Carolina(19) OCCUPATION Housewife(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 at Black Bluff M. on the date above stated. (Born alive or stillborn Hour M. or P. M.)(23) (Signature) Midwife(24) State whether Physician or Midwife (25) Address of Physician or Midwife Black Bluff(26) Give name added from a supplement and report Black Bluff(27) Witness W. C. Williams (Signature of Witness necessary only when question 23 is signed by mark)(28) Date Feb. 20, 1923 (29) W. C. Williams 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 be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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 8

Form 10-Colum. Columbia S C