

(1) PLACE OF BIRTH

County of DarlingtonTownship of Darlington

or Town of .....

City of Darlington

(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

29304

Registration District No. 15A Registered No. 106  
(For use of Local Registrar)(No. 561 Jeannine St. ..... Ward .....)(3) Full Name of Child James Nelson If child is not yet named, make supplemental report as directed(4) Twin or Triplet? ✓ (5) Number in order of birth ✓ (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 17, 1917  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME George Nelson(9) PRESENT POSTOFFICE OF FATHER Darlington S.C.(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 23 (Years)(12) BIRTHPLACE Lee Co S.C.(13) OCCUPATION auto truck driver for lumber(14) Number of children born to mother, including present birth Two

## MOTHER.

(14) NAME BEFORE MARRIAGE Victoria Murray(15) PRESENT POSTOFFICE OF MOTHER Darlington S.C.(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE Chesterfield Co S.C.(19) OCCUPATION at home + laborer(20) Number of children of this mother now living, including present birth one

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was alive at 9:05 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) G. B. Edwards(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Darlington 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 Oct. 1, 1917 (28) C. O. Early Local Registrar

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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