CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 15923

(1) PLACE OF BIRTH

County of Fairfield

Township of Longtown
or
Inc. Town of .....
or
City of ..... (No. ..... St.; ..... Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 3300 Registered No. 22 (For use of Local Registrar)

(2) Full Name of Child Elder Lee Jones (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 — To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH May 21 1922 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Willie Jones

(9) PRESENT POSTOFFICE OF FATHER Mt Zion S.C.

(10) COLOR OR RACE colored

(11) AGE AT LAST BIRTHDAY 35 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farm Labor

(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Pearl Gillis

(15) PRESENT POSTOFFICE OF MOTHER Mt Zion

(16) COLOR OR RACE Negro

(17) AGE AT LAST BIRTHDAY 24 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Farm help

(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Lora Connell

(24) State whether Physician or Midwife: Midwife

(25) Address of Physician or Midwife: Mt Zion S.C.

Given name added from a supplemental report

..... 19 ..... Registrar

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

(27) Filed June 13 1922 (28) C. L. Newton 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.

FAVORITE BLANKS, WELL DESIGNED, WELL PRINTED, WELL BOUND. WHEN BLANKS ARE USED IN A PERMANENT RECORD, THEY SHOULD BE LINEN RECORD INK—THIS IS A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS, ADD LINE IN REGISTRAR'S BLANK FOR EACH CHILD, and answer the questions 6, 7, etc., in question 5. REGISTRATION, No. 2, etc., in question 6.