

(1) PLACE OF BIRTH

County of Cutler
 Township of Sleepy Hollow
 or
 Inc. Town of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

62881

Registration District No. 212 Registered No. 119
 (For use of Local Registrar)

City of (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 Willie H. 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 (6) Are Parents Married? yes (7) DATE OF BIRTH June 2 191...
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Carl Jones

(9) PRESENT POSTOFFICE OF FATHER Hawthorne

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 25 (Years)

(12) BIRTHPLACE AS

(13) OCCUPATION Labor

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Julia Corbett

(15) PRESENT POSTOFFICE OF MOTHER Hawthorne

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE SC

(19) OCCUPATION Labor

(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 4 P. M., on the date above stated. (born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Harry Jackson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Hawthorne

Given name added from a supplemental report

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

(27) Filed 7/10 191... (28) W. D. Eubank 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.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN N. No. 1, THE OTHER, No. 2, etc., in question 5.