

(1) PLACE OF BIRTH

County of Richland
 Township of Blythewood
 or
 Inc. Town of
 or
 City of Willie James Alston

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only
16513

Registration District No. 3800 Registered No. 66
 (For use of Local Registrar)

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

(2) Full Name of Child James Archie (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 May 25, 1922
 (Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Tom Archie Alston</u>	(14) NAME BEFORE MARRIAGE <u>Julia Ann Richman</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Blythewood SC</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Blythewood SC</u>
(10) COLOR OR RACE <u>Col</u>	(11) AGE AT LAST BIRTHDAY <u>40</u> (Years)	(16) COLOR OR RACE <u>Col</u>	(17) AGE AT LAST BIRTHDAY <u>35</u> (Years)
(12) BIRTHPLACE <u>Richland SC</u>	(18) OCCUPATION <u>Farmer</u>	(19) BIRTHPLACE <u>Richland SC</u>	(20) OCCUPATION <u>Field work</u>
(21) Number of children born to mother, including present birth <u>five</u>	(22) Number of children of this mother now living, including present birth <u>five</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 7:00 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) Signature Emma Brewer (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Blythewood SC

Given name added from a supplemental report

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(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) W. A. Wilson
 (27) Date June 3, 1922 (28) 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 sixth month of pregnancy.

FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 6.