

WRITE PLAINLY. WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
N 11—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN. No 1 THIS OFFICE. No 2, etc. in question 1

(1) PLACE OF BIRTH
 County of Orangeburg
 Township of Holly Hill
 or Inc. Town of _____
 City of _____
 (No. _____) St.; _____ Ward)
 (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
2187

Registration District No. 3609 Registered No. 5
 (For use of Local Registrar)

(2) Full Name of Child Sarah Margaret
 (If child is not yet named, make supplemental report as directed)

(1) BOY OR GIRL Girl (4) Twin or Triplet? No (3) Number in order of birth 1 (5) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 3, 1922
 To be answered only in event of Twins or Triplets (Specify of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Sarah Wright</u>	(14) NAME BEFORE MARRIAGE <u>Ann Bunkert</u>	(10) PRESENT POSTOFFICE OF FATHER <u>Holly Hill</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Holly Hill</u>
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>28</u> (Years)	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>35</u> (Years)
(12) BIRTHPLACE _____	(18) BIRTHPLACE _____	(19) OCCUPATION _____	(21) Number of children of this mother now living, including present birth <u>4</u>
(13) OCCUPATION _____	(20) Number of children born to mother, including present birth <u>4</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 6 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Sarah Ellis
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Holly Hill S.C.

Given name added to a supplemental report _____
 (26) Witness M. H. ... (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed Jan. 12, 1922 (28) J. M. ... 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.

Revised by Columbia, Baltimore, Md.