

(1) PLACE OF BIRTH

County of EdgefieldTownship of Long Marsh

or

Inc. Town of

or

City of

(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

Registration District No. 1514Registered No. 44
(For use of Local Registrar)

File No.—For State Registrar Only

24298(2) Full Name of Child Archibald Johnson Wiggall

If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL <u>boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>Jan 29 1923</u> (Month of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME			(14) NAME BEFORE MARRIAGE <u>Maria Wiggall</u>	
(9) PRESENT POSTOFFICE OF FATHER			(15) PRESENT POSTOFFICE OF MOTHER	
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY (Years)	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY <u>15</u> (Years)	
(12) BIRTHPLACE			(18) BIRTHPLACE <u>Edgefield Co.</u>	
(13) OCCUPATION			(19) OCCUPATION <u>housekeeper & farm laborer</u>	
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive as 11 A on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) D. B. Jones(24) State whether Physician or Midwife (25) Address of Physician or Midwife My. Ridge Spring

Given name added from a supplemental report

1 5 191

Registrar

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

(27) Filed Sept 19 1923 (28) D. B. Jones 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.

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