

IF A PERMANENT RECORD IS MADE OF TWINS OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1. THE OTHER, NO. 2, etc., IN QUESTION 8.

(1) PLACE OF BIRTH

County of

Lancaster

Township of

Wright

OR

Inc. Town of

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

File No. — For State Registrar Only

15555

Registration District No.

Registered No. 18

(For use of Local Registrar)

(2) Full Name of Child William Henry Adams

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 18, 22

(8) FULL NAME

FATHER. Arthur Adams

(9) PRESENT POSTOFFICE OF FATHER

Osceola S.C.

(10) COLOR OR RACE

negro

(11) AGE AT LAST BIRTHDAY

32

(12) BIRTHPLACE

Chester Co.

(13) OCCUPATION

Farmer

(14) NAME BEFORE MARRIAGE

MOTHER. Hester Springs

(15) PRESENT POSTOFFICE OF MOTHER

Osceola S.C.

(16) COLOR OR RACE

negro

(17) AGE AT LAST BIRTHDAY

23

(18) BIRTHPLACE

Lancaster Co.

(19) OCCUPATION

Domestic

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

4

(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, on the date above stated.

Born alive & full term.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Maria Ross

(24) State whether Physician or Midwife

midwife

(25) Address of Physician or Midwife

Osceola S.C.

Given name added from a supplemental report

(26) Witness

Alice Adams

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

B. J. Richardson

Registrar

(27) Filed

May 20, 22

(28)

B. J. Richardson

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.