

(1) PLACE OF BIRTH

County of Frederick
 Township of Shelburne

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

4336

24

Registration District No. 2204 Registered No.
 (For use of Local Registrar)

(2) Full Name of Child

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

(1) BOY OR GIRL? (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME W. J. S. S. S.
 (9) PRESENT POSTOFFICE OF FATHER Frederick
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22 (Years)
 (12) BIRTHPLACE Frederick
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Miss M. S. S.
 (15) PRESENT POSTOFFICE OF MOTHER Frederick
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE Frederick
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) W. J. S. S.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Frederick

Given name added from a supplemental report

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

(27) Filed Mar 1 1922 (28) F. J. S. S. 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.

Before the fifth month of pregnancy.