

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—In case 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 5.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Laurens  
Township of Hills Creek  
OR  
Inc. Town of Laurens  
OR  
City of .....

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**15533**

Registration District No. 2804 Registered No. 92  
(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

Jimmie Massey

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? No (7) DATE OF BIRTH May 27 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Leroy Massey  
(9) PRESENT POSTOFFICE OF FATHER Laurens R. 1  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 18  
(12) BIRTHPLACE Laurens County  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE Sallie Dixon  
(15) PRESENT POSTOFFICE OF MOTHER Laurens R. 1  
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 16  
(18) BIRTHPLACE Laurens County  
(19) OCCUPATION Woods on Farm  
(21) Number of children of this mother now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 1:29 P. M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Patsy J. Shannon  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Laurens R. 1

Given name added from a supplemental report

(26) Witness L. G. Williams, Mayor  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed May 23 1922 (28) J. T. Thompson  
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.