

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 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 1.

(1) PLACE OF BIRTH

County of Lee
 Township of Bishopville
 Inc. Town of.....
 City of.....

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

No. for State Registrar Only
32048

Registration District No. 3.000 Registered No. 4.4
 (For use of Local Registrar)

(No. St. Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child William S. Scarborough (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Male (4) Type or Trade Infant (5) Number in order of birth 1st (6) Age of Mother 22 (7) DATE OF BIRTH Dec 23 1923
 To be answered only in case of Twins or Triplets (Date of Month) (Day) (Year)

FATHER.

(8) FULL NAME John S. Scarborough
 (9) PRESENT RESIDENCE OF FATHER Bishopville S.C.
 (10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 22 (Year)
 (12) BIRTHPLACE Lee Co S.C.
 (13) OCCUPATION Farmer
 (14) Number of children born to father, including present birth 12

MOTHER.

(15) NAME BEFORE MARRIAGE Reggie S. Scarborough
 (16) PRESENT RESIDENCE OF MOTHER Bishopville S.C.
 (17) COLOR OR RACE Col (18) AGE AT LAST BIRTHDAY 22 (Year)
 (19) BIRTHPLACE Lee Co
 (20) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was St. No.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Polina Williams

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Bishopville S.C.

Given name added from a supplementary report

(26) Witness

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

Filed Dec 30 1923 (27) Wm. H. Long Local Registrar

When there is a stillbirth, the father, householder, etc., should make this report as soon as possible, and before the child is buried. No report is desired of stillbirths occurring within the first month of pregnancy.