

THIS IS A PERMANENT RECORD. If a child is born at home, use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc. in question 5. REGISTER OF COLONIAL COUNCIL, S. C.

(1) PLACE OF BIRTH
 County of Jackson
 Township of Casley
 OR
 Inc. Town of
 OR
 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
8827

Registration District No. 2702 Registered No. 12
 (For use of Local Registrar)

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <small>To be answered only in event of Twin or Triplet</small>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>
FATHER:			(7) DATE OF BIRTH <u>Feb. 11, 22</u> <small>(Name of Month) (Day) (Year)</small>
(8) FULL NAME <u>Tom Hinton</u>	MOTHER:		
(9) PRESENT POSTOFFICE OF FATHER <u>Casley R. F. D.</u>	(14) NAME BEFORE MARRIAGE <u>Fay Christopher</u>		
(10) COLOR OR RACE <u>W.</u>	(11) AGE AT LAST BIRTHDAY <u>20</u> <small>(Year)</small>	(15) PRESENT POSTOFFICE OF MOTHER <u>Casley R. F. D.</u>	
(12) BIRTHPLACE <u>S. C.</u>	(16) COLOR OR RACE <u>W.</u>	(17) AGE AT LAST BIRTHDAY <u>29</u> <small>(Year)</small>	
(13) OCCUPATION <u>Farming</u>	(18) BIRTHPLACE <u>S. C.</u>		
(20) Number of children born to mother, including present birth <u>3</u>	(19) OCCUPATION <u>Domestic</u>		
		(21) Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) N. M. Conner

(24) State whether Physician or Midwife M. D. (25) Address of Physician or Midwife Dacusville

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Mar 13 1922 (28) H. M. Wyatt 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.