

MADE IN COLUMBIA, S. C.

WITH UNFADING INK—WRITE 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.

(1) PLACE OF BIRTH

County of Edgefield
 Township of Taft
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
34265

Registration District No. 1815 Registered No. 31
 (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 Joanell Harrison If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Mar 21 1922
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME James Harrison
 (9) PRESENT POSTOFFICE OF FATHER Plum Branch
 (10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 29
 (12) BIRTHPLACE Edgefield Co.
 (13) OCCUPATION Farmer
 (20) Number of children born mother, including present 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Emma Lewis
 (15) PRESENT POSTOFFICE OF MOTHER Plum Branch
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29
 (18) BIRTHPLACE Edgefield Co.
 (19) OCCUPATION House & Farm work
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) James Harrison
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Plum Branch

Given name added from a supplemental report

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

(27) Filed Oct 19 1922 (28) J. D. Hughes Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.