

## (1) PLACE OF BIRTH

County of Marlboro  
 Township of Barnesville  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St.; .... Ward)

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

Registration District No. 3300

File No.—For State Registrar Only

43692

Registered No. 61  
(For use of Local Registrar)(2) Full Name of Child Rean Morrison

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 1, 1922  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Boston Morrison(9) PRESENT POSTOFFICE OF FATHER Barnesville, S.C.(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 37 (Years)(12) BIRTHPLACE Marl. Co. S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 9

## MOTHER.

(14) NAME BEFORE MARRIAGE Ledia Edwards(15) PRESENT POSTOFFICE OF MOTHER Barnesville S.C.(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 38 (Years)(18) BIRTHPLACE Marl Co. S.C.(19) OCCUPATION H.W.(21) Number of children of this mother now living, including present birth 9

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. H. Smith M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Barnesville

Given name added from a supplemental report

(26) Witness

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

(27) Filed Dec 30 22

(28)

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. (If a child is born before the fifth month of pregnancy, 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.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

BUREAU OF VITAL STATISTICS, COLUMBIA, S. C.