

**(1) PLACE OF BIRTH**  
 County of Aiken  
 Township of .....  
 OR  
 Inc. Town of .....  
 OR  
 City of Aiken S.C. (No. 910. Kershaw 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  
17323

Registration District No. 2A Registered No. 32  
 (For use of Local Registrar)

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH <u>April 10 1922</u> (Name of Month) (Day) (Year)
<b>FATHER</b>			<b>MOTHER</b>	
(8) FULL NAME <u>Lard Bibb Jr</u>			(14) NAME BEFORE MARRIAGE <u>Bettie Bright</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Edgefield S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Aiken S.C.</u>	
(10) COLOR OR RACE <u>Colored</u>			(16) COLOR OR RACE <u>1</u>	
(11) AGE AT LAST BIRTHDAY <u>30</u> (Year)			(17) AGE AT LAST BIRTHDAY <u>24</u> (Year)	
(12) BIRTHPLACE <u>Springer S.C.</u>			(18) BIRTHPLACE <u>Edgefield S.C.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>a cooper</u>	
(20) Number of children born to mother, including present birth			(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 Jesse H. Midway at day M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)  
 (24) State whether Physician or Midwife  
Marion Baker (25) Address of Physician or Midwife  
813 Sumpter St.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
J. M. Ashurst

(27) Filed June 6 1922 (28) J. M. Ashurst Local Registrar

19 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.

per H. P. Ashurst