

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. In a 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 Anderson  
 Township of .....  
 or  
 Inc. Town of Peah  
 or  
 City of .....

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

File No.—For State Registrar Only  
**43825**

Registration District No. 3404 Registered No. 80  
 (For use of Local Registrar.)

(2) Full Name of Child Alfred James Suber (No. .... St.; ..... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? Y (7) DATE OF BIRTH Dec. 22, 1922  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Henry James Suber  
 (9) PRESENT POSTOFFICE OF FATHER Peah  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)  
 (12) BIRTHPLACE I. C.  
 (13) OCCUPATION Merchant  
 (20) Number of children born to mother, including present birth 2

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Marie Izeta Fulmer  
 (15) PRESENT POSTOFFICE OF MOTHER Peah  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)  
 (18) BIRTHPLACE I. C.  
 (19) OCCUPATION at home  
 (21) Number of children of this mother now living, including present birth 2

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was... born alive... at... 1:20... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. A. Jones  
 (24) State whether Physician (25) Address of Physician or Midwife Peah

Given name added from a supplemental report  
 .....  
 ..... 19... Registrar

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed 1/9 19... (28) R. J. Johnson 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.

MEDICAL DEPARTMENT, COLUMBIA S. C.