

PLACE OF BIRTH

County of Horry
Township of Jacoutee

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

14495

Registration District No. 7510 Registered No. 13
(For use of Local Registrar)City of Jacoutee (If birth occurs in a hospital or other institution, give name of same instead of street and number.)Full Name of Child J. L. Kell, Jr. If child is not yet named, make supplemental report as directedBOY OR GIRL Boy (4) Twin or triplet? No (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 4 1923
(Name of Month) (Day) (Year)FATHER: FULL NAME Richard Kell (14) NAME BEFORE MARRIAGE John, CogdellPRESENT POSTOFFICE OF FATHER Wargess (15) PRESENT POSTOFFICE OF MOTHER Burgess(8) COLOR OR RACE Nigger (9) AGE AT LAST BIRTHDAY 22 (10) AGE AT LAST BIRTHDAY 21
(Years) (Years)(11) BIRTHPLACE Florida (12) BIRTHPLACE Florida(13) OCCUPATION Farmer & House (16) OCCUPATION Farmer & House(17) Number of children born to mother, including present birth 2 (18) 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 white, at 7:00 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. L. Kell, Jr. (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Wargess

(When name added from a supplemental report)

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

(27) Filed Jan 10 1923 (28) J. L. Kell, Jr. 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.

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