

MARGIN RESERVED FOR INDEXING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS 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 Sumter
 Township of Sumter
 or
 Inc. Town of
 or
 City of
 (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
32504

Registration District No. 4108 Registered No. 149
 (For use of Local Registrar)

(2) Full Name of Child Willie Edward Jackson child is not yet named, make supplemental report as directed

3) BOY OR GIRL <u>boy</u>	4) Twin or Triplet? <u>no</u>	5) Number in order of birth <u>1</u>	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>Oct 13</u> 19 <u>22</u> (Month of Month) (Day) (Year)
8) FULL NAME <u>Edward Jackson</u>		9) PRESENT POSTOFFICE OF FATHER <u>Sumter</u>		
10) COLOR OR RACE <u>Brown</u>		11) AGE AT LAST BIRTHDAY..... (Years)		
12) BIRTHPLACE <u>Bonham</u>		13) OCCUPATION <u>Farming</u>		
20) Number of children born to mother, including present birth <u>2</u>		21) Number of children of this mother now living, including present birth <u>2</u>		
14) NAME BEFORE MARRIAGE <u>Ellen Spingello</u>		15) PRESENT POSTOFFICE OF MOTHER <u>Sumter</u>		
16) COLOR OR RACE <u>Brown</u>		17) AGE AT LAST BIRTHDAY..... (Years)		
18) BIRTHPLACE		19) OCCUPATION		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Louisa Hallson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 19

*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.

Seal of Columbia, Columbia, S. C.