

(1) PLACE OF BIRTH

County of Highland
 Township of Highland
 or
 Inc. Town of.....
 or
 City of.....

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

Registration District No. 380 Registered No. 8
 (For use of Local Registrar)

File No.—For State Registrar Only

2395

(2) Full Name of Child

1. BOY OR GIRL? G 4. Twin or Triplet? - (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 12 1920
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 3. FULL NAME Miss Smith
 3. PRESENT POSTOFFICE OF FATHER Highland
 (10) COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 19 (Years)
 (12) BIRTHPLACE W.C.
 (13) OCCUPATION Teacher

MOTHER.
 (14) NAME BEFORE MARRIAGE Alma Jones
 (15) PRESENT POSTOFFICE OF MOTHER Ballentine
 (16) COLOR OR RACE W.C. (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE W.C.
 (19) OCCUPATION Teacher

20. Number of children born to mother, including present birth 1
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 1920 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Edith Rickard
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Ballentine

Given name added from a supplemental report.

(26) Witness (Signature of Witness necessary only when question 25 is signed by mark)

(27) Filed June 12 1920 (28) J. C. Brady

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.

MARGIN RESERVED FOR INDEXING.

WRITE PLAINLY, WITH UNFADING INK—FILL IN A PERMANENT RECORD. IN CASE OF PHYSICIAN, FILL IN HOW A MEDICAL BLANK FOR EACH CHILD, AND MARK THE CHILD'S NAME, No. 1. THIS OFFICE, No. 2, etc., in question 6.

Receives Signature, Date, and Initials