

(1) PLACE OF BIRTH

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County of Marian
Township of Reaves
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

35581

Registration District No. 3705

Registered No. 171
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child John Thomas Jones 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? Yes (7) DATE OF BIRTH Sept 4 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jessie Valentine Jones

(9) PRESENT POSTOFFICE OF FATHER Mullins SC

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 40
(Year)

(12) BIRTHPLACE Harry County SC

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Bertie Johnson

(15) PRESENT POSTOFFICE OF MOTHER Mullins SC

(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 32
(Year)

(18) BIRTHPLACE Harry County SC

(19) OCCUPATION House & Farm work

(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Smith

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Mullins SC

Given name added from a supplemental report

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

(27) Filed 9/5/22 (28) M. Schaffer 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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RECEIVED BY COLUMBIA, COLUMBIA, S. C.