

RECEIVED RESERVES FOR BENDING.  
WHITE PLAINS, N. Y. IN CASE OF TWINS OR TRIPLETS USE A SEPARATE REPORT FOR EACH CHILD, and mark the FIRST-BORN. No. 1 THE OTHER, No. 2, etc. In question 8, mention of Columbia, California & C.

(1) PLACE OF BIRTH

County of Lee  
Township of Turkey Creek  
or  
Inc. Town of.....  
or  
City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

19346

Registration District No 3009. Registered No. 31  
(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 Willie Dixon

(If child is not yet named, make supplemental report as directed)

3 SEX OR GIVER Boy 4 Twin or Triplet? — 5 Number in order of birth 1 6 Are Parents Married? yes 7 DATE OF BIRTH June 26 1934  
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME Henry Dixon  
9 PRESENT POSTOFFICE OF FATHER Bethun S.C. R.F.D.  
10 COLOR OR RACE Negro 11 AGE AT LAST BIRTHDAY 33 (Years)  
12 BIRTHPLACE S.C. N.S.A.  
13 OCCUPATION Farming  
14 Number of children born to mother, including present birth 7

MOTHER.

14 NAME BEFORE MARRIAGE Eliza Davies  
15 PRESENT POSTOFFICE OF MOTHER Bethun S.C. R.F.D.  
16 COLOR OR RACE Negro 17 AGE AT LAST BIRTHDAY 30 (Years)  
18 BIRTHPLACE S.C. N.S.A.  
19 OCCUPATION Housework  
20 Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 8 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lavine Smith  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Luckner, S.C.

Given name added from a supplemental report

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

(27) Filed July 8 1934 (28) J. O. Rodgers 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.