

MARGIN RESERVED FOR BINDING.

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 2.

Machine of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Charleston
Township of Lowndes
or
Inc. Town of Jefferson St.
or
City of Jefferson St.
(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

657

Registration District No. 109 Registered No. 3
(For use of Local Registrar)

(2) Full Name of Child Paul Cruise Sexton

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? 1 (5) Number in order of birth 8 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 2, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Carter Sexton
(9) PRESENT POSTOFFICE OF FATHER Jefferson St.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 44 (Year)
(12) BIRTHPLACE Hammond County, Tenn.
(13) OCCUPATION mill work
(20) Number of children born to mother, including present birth 1 8

MOTHER.

(14) NAME BEFORE MARRIAGE Lula Cuthbert
(15) PRESENT POSTOFFICE OF MOTHER Jefferson St.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36 (Year)
(18) BIRTHPLACE Green County, Tenn.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 1 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was White at 11 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. A. Darden M.D.
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Jefferson St.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 2/10 1922 (28) M. F. Smith 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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