

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 5.

Form No. 1

(1) PLACE OF BIRTH

County of Georgetown  
Township of #4  
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  
**34502**

Registration District No. 2102 Registered No. 125  
(For use of Local Registrar)

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

(2) Full Name of Child Pauline M. Lee Morris If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Female (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 12 22  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME William Vance Morris  
(9) PRESENT POSTOFFICE OF FATHER Georgetown S.C. R#1  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31  
(Year) (12) BIRTHPLACE Marlboro Co. S.C.  
(13) OCCUPATION Carpenter  
(20) Number of children born to mother, including present birth 4

MOTHER  
(14) NAME BEFORE MARRIAGE Ruth Mercer  
(15) PRESENT POSTOFFICE OF MOTHER Georgetown S.C. R#1  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31  
(Year) (18) BIRTHPLACE Georgetown Co. S.C.  
(19) OCCUPATION Domestic  
(21) Number of children of this mother now living, including present birth 4

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) Mrs. Lydia Mercer Mednick  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Georgetown S.C. R#1

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Oct 20 22 (28) W. B. Bailey 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.

Revised by Columbia, Columbia, S. C.