

(1) PLACE OF BIRTH

County of AikenTownship of Greenvilleor
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

17339

Registration District No. 204Registered No. 43
(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 Sylvester James

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 2
To be answered only in event of Twins or Triplets(6) Are Parents Married? NO(7) DATE OF BIRTH June 6, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jim James(9) PRESENT POSTOFFICE OF FATHER Longley S C(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 35
(Years)(12) BIRTHPLACE Aiken SC(13) OCCUPATION Miss Hand(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Mahley(15) PRESENT POSTOFFICE OF MOTHER Warrenville SC(16) COLOR OR RACE N(17) AGE AT LAST BIRTHDAY 18
(Years)(18) BIRTHPLACE Aiken SC(19) OCCUPATION Wash. Woman(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 7 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) S. A. Marshall(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Warrenville SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed June 10, 1922W. H. Threlkell, R. L. M. D.
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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