

(1) PLACE OF BIRTH

County of Hampton
 Township of Rel.plex
 or
 Inc. Town of

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

The No. — For State Registrar Only
30652

Registration District No. 74.07

Registered No. 114
 (For use of Local Registrar)

City of (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 Cecil Allen Gooding (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 2 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 4, 22
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Murphy Gooding

(9) PRESENT POSTOFFICE OF FATHER Varnville SC

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34
 (Year)

(12) BIRTHPLACE H. Co.

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Mildred T Thomas

(15) PRESENT POSTOFFICE OF MOTHER Varnville

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 24
 (Year)

(18) BIRTHPLACE H. Co.

(19) OCCUPATION House work

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P. M.
 on the date above stated. (Born alive or stillborn) (Hour & P. M.)

(23) (Signature) Annie Moore, Midwife

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

Given name added from a supplemental report

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

(27) Filed Sept 12, 22 (28) Local Registrar J. H. Rogers

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.