

(1) PLACE OF BIRTH

County of ChesterTownship of Lewisvilleor
Inc. Town ofor
City of

(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

33714

Registration District No. 1106 Registered No. 108
(For use of Local Registrar)

(2) Full Name of Child

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

3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

No

(7) DATE OF

BIRTH 9/9/22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Tom Jones

(9) PRESENT POSTOFFICE OF FATHER

Rodman Sc.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

30
(Years)

(12) BIRTHPLACE

Sc

(13) OCCUPATION

Farm Work

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

2

MOTHER.

(14) NAME BEFORE MARRIAGE

Janie Brown

(15) PRESENT POSTOFFICE OF MOTHER

Rodman

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

28
(Year)

(18) BIRTHPLACE

Sc

(19) OCCUPATION

Farm Work

(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 10 M., on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature)

Aletha M. Danie

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Reichburg

Given name added from a supplemental report

(26) Witness

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

(27) Filed

10/17/22 (28) J. H. Hall 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.