

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.

(1) PLACE OF BIRTH
County of Thurston
Township of Washington
or
Inc. Town of.....
or
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

41516

Registration District No. 1004 Registered No. 20
(For use of Local Registrar)

(2) Full Name of Child Scott Ozell George 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 3rd (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 22, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Sidney George
(9) PRESENT POSTOFFICE OF FATHER Thicketty
(10) COLOR OR RACE w (11) AGE AT LAST BIRTHDAY 24
(Years)
(12) BIRTHPLACE SC
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 3rd

MOTHER.
(14) NAME BEFORE MARRIAGE Pearl Staffins
(15) PRESENT POSTOFFICE OF MOTHER Thicketty SC
(16) COLOR OR RACE w (17) AGE AT LAST BIRTHDAY 23
(Years)
(18) BIRTHPLACE Ga
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 3rd

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was..... at 9:15 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) T. J. Seane (24) State whether Physician or Midwife (25) Address of Physician or Midwife Campers, SC.

Given name added from a supplemental report
1-8-41
Martin B. Woodward, M. D.
Assistant State Registrar

(26) Witness..... (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Jan 10, 1923 (28) J. Gardner 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.