

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD, and mark the
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the

(1) PLACE OF BIRTH

County of Darlington
Township of Society Hill
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
34021

Registration District No. 1510 Registered No. 746.....
(For use of Local Registrar)

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

(2) Full Name of Child Bennie Atkinson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 38 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 20 1922
(Name of Month) (Day) (Year)

FATHER. (8) FULL NAME John Atkinson (14) NAME BEFORE MARRIAGE Florence Jones

(9) PRESENT POSTOFFICE OF FATHER Society Hill (15) PRESENT POSTOFFICE OF MOTHER Society Hill

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 29
(Years) (Years)

(12) BIRTHPLACE S. C. (18) BIRTHPLACE S. C.

(13) OCCUPATION Farmer (19) OCCUPATION Home wife

(20) Number of children born to mother, including present birth 8 (21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was Born alive or stillborn (Born alive or stillborn) (Four A. M. or P. M.)

(22) on the date above stated. (23) (Signature) Carrie Bishop (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Society Hill

Given name added from a supplemental report
....., 19 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) (27) Filed Dec 10 1922 (28) Carrie Bishop 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.

MCCAW OF COLUMBIA, COLUMBIA, S. C.