

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.

CERTIFICATE OF BIRTH				File No.—For State Registrar Only	
STATE OF SOUTH CAROLINA				24448	
Bureau of Vital Statistics					
State Board of Health					
(1) PLACE OF BIRTH		Registration District No. 260		Registered No. 2844	
County of Aiken				(For use of Local Registrar)	
Township of					
or					
Inc. Town of					
or					
City of Aiken		(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 William Spell				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	
To be answered only in event of Twins or Triplets					
(6) Are Parents Married? No		(7) DATE OF BIRTH Aug 9th 1922		(Name of Month) (Day) (Year)	
FATHER.			MOTHER.		
(8) FULL NAME Rother Spell			(14) NAME BEFORE MARRIAGE Mattie Collins		
(9) PRESENT POSTOFFICE OF FATHER Aiken S.C.			(15) PRESENT POSTOFFICE OF MOTHER Aiken S.C.		
(10) COLOR OR RACE Colored			(16) COLOR OR RACE Colored		
(11) AGE AT LAST BIRTHDAY 19 (Years)			(17) AGE AT LAST BIRTHDAY 19 (Years)		
(12) BIRTHPLACE Aiken Co S.C.			(18) BIRTHPLACE Aiken Co S.C.		
(13) OCCUPATION Farmer			(19) OCCUPATION Housewife		
(20) Number of children born to mother, including present birth One			(21) Number of children of this mother now living, including present birth One		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was born alive 4:10 P.M. at on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) J. H. Farmer M.D.					
(24) State whether Physician or Midwife					
(25) Address of Physician or Midwife Aiken S.C.					
Given name added from a supplemental report			(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)		
19 Registrar			(27) Filed Aug 11 1922 (28) M. R. R. 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.					

MOBAY OF COLUMBIA, COLUMBIA, S. C.