

(1) PLACE OF BIRTH

County of Orangeburg
 Township of Rocky Mount
 Inc. Town of.....
 or
 City of North S.C.
 (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

18751

Registration District No. 3.6.11 Registered No. 2
 (For use of Local Registrar)

(2) Full Name of Child James J. Washington (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Male (4) Type of Twin 1 (5) Age of Mother 27 (6) DATE OF BIRTH June 30, 1923
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Julian Jackson
 (9) PRESENT POSTOFFICE OF FATHER North S.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 27 (Year)
 (12) BIRTHPLACE Aiken County S.C.
 (13) OCCUPATION Farming
 (14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Hattie Washington
 (15) PRESENT POSTOFFICE OF MOTHER North S.C.
 (16) COLOR OR RACE h (17) AGE AT LAST BIRTHDAY 22 (Year)
 (18) BIRTHPLACE Orangeburg Co. S.C.
 (19) OCCUPATION Helping Farm
 (20) Number of children of the mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was born at home on the date above stated. (Born alive or ~~stillborn~~) (Hour ~~2:30~~ 2:30)

(22) (Signature) Thomas McElwain
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife

(Given name added from a supplemental report)

L. Darby
Sept. 8, 1923
 Registrar

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

(26) Filed July 10, 1923 (27) V. M. Sharpe 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.