

RECEIVED 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 Kershaw
 Township of Palmer
 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
1683

Registration District No. 2704

Registered No.....
 (For use of Local Registrar)

(2) Full Name of Child Charlie Facesson

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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 30 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charlie Facesson
 (9) PRESENT POSTOFFICE OF FATHER Lugoff S.b
 (10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE South Carolina
 (13) OCCUPATION Public work
 (20) Number of children born to mother, including present birth 1 two

MOTHER.

(14) NAME BEFORE MARRIAGE Hattie Baskin
 (15) PRESENT POSTOFFICE OF MOTHER Lugoff S.b
 (16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE South Carolina
 (19) OCCUPATION Farmer
 (21) Number of children of this mother now living, including present birth 1 two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 2 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rebecca Anderson
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given affid added from a supplemental report

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

M. B. Steward
7/7/41 19 22
 Registrar

(27) Filed Jan 30 19 22 Miss H. G. G. G.
 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.