

(1) PLACE OF BIRTH

County of Bamberg
 Township of Buford Bridge
 or
 Inc. Town of Govan
 or
 City of Se

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

28885

Registration District No. 4.01 Registered No. 94
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Elaine Ross

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 1, 22
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Johnny Ross
 (9) PRESENT POSTOFFICE OF FATHER Govan S.C.
 (10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 25
 (12) BIRTHPLACE Govan S.C.
 (13) OCCUPATION Government work
 (20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Larc Minnison
 (15) PRESENT POSTOFFICE OF MOTHER Govan S.C.
 (16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 23
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION public work
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 A.M. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lizzie Washington
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Govan S.C.

Given name added from a supplemental report

(26) Witness J. E. Bennett
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Sept. 7, 1922 (28) J. E. Bennett
 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.

or pregnancy. or stillbirths.