

Form No. 1

(1) PLACE OF BIRTH

County of Marion  
 Township of Reaves  
 OF  
 Inc. Town of .....  
 OF  
 City of .....

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

7809

Registration District No. 3705 Registered No. 10  
 (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 Emerson Mitchell If child is not yet named, make supplemental report as directed

(3) Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Sex Male (7) DATE OF BIRTH Jan. 12, 1923  
To be answered only in case of Twins or Triplets  
(Name of Month) (Day) (Year)

FATHER  
 (8) FULL NAME Joe Mitchell  
 (9) PRESENT POSTOFFICE OF FATHER Mullins  
 (10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 30  
 (12) BIRTHPLACE Marion  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 5

MOTHER  
 (14) NAME BEFORE MARRIAGE Martha Evans  
 (15) PRESENT POSTOFFICE OF MOTHER Mullins  
 (16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 26  
 (18) BIRTHPLACE Marion  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 A.M. on the date above stated.  
(Born alive or stillborn) Hour (A. M. or P. M.)

(23) (Signature) Mary Jane Evans  
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Mullins

Given name added from a supplemental report

(26) Witness Wm Schuffler  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan. 20, 1923 (28) Wm Schuffler  
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.