

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH A NEADING 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 4

(1) PLACE OF BIRTH

County of Anderson
Township of Savannah
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
3089

Registration District No. 311 Registered No. 19
(For use of Local Registrar)

(2) Full Name of Child J. Ola Deed

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 Feb 15 22
(Name of Month) (Day) (Year)

FATHER
(8) FULL NAME Willie Deed
(9) PRESENT POSTOFFICE OF FATHER Star 30
(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 2 (Years)
(12) BIRTHPLACE Anderson Co
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1

MOTHER
(14) NAME BEFORE MARRIAGE Lula Deed
(15) PRESENT POSTOFFICE OF MOTHER Star 30
(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 19 (Years)
(18) BIRTHPLACE Anderson Co
(19) OCCUPATION Farmer
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at Star 30 M., on the date above stated. (Born alive or stillborn) (House, St. or P. M.)

(23) (Signature) Jesse Golden
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Star 30

Given name added from a supplemental report
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.....
19.....
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
May 9 1922
(27) Filed May 9 1922 (28) 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.