

## (1) PLACE OF BIRTH

County of Anderson  
 Township of Frank  
 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  
**6447**

Registration District No. 304 Registered No. 26  
 (For use of Local Registrar)

(No. .... St.; ..... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

## (2) Full Name of Child

(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 Mar. 5, 1922  
 (Name of Month) (Day) (Year)

## FATHER:

## MOTHER:

(8) FULL NAME Burton Jones

(14) NAME BEFORE MARRIAGE Betty Thompson

(9) PRESENT POSTOFFICE OF FATHER Jamville S.C.

(15) PRESENT POSTOFFICE OF MOTHER Jamville S.C.

(10) COLOR OR RACE B. (11) AGE AT LAST BIRTHDAY 23 (Years)

(16) COLOR OR RACE B. (17) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE S.C.

(18) BIRTHPLACE S.C.

(13) OCCUPATION Domestic

(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 2

(21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was, Burton Jones at 12 M.,  
 (Born alive or stillborn) (Hour A. M. or P. M.)  
 on the date above stated.

(23) (Signature) B. A. Thompson (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Jamville S.C.

Given name added from a supplemental report

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

(27) Filed Mar. 11, 1922 (28) J. P. Gallaway 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.