

1. 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 Williamsburg
 Township of Penn
 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
 2718

Registration District No. 4308

Registered No. 6
 (For use of Local Registrar)

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

(2) Full Name of Child Edward Gamble

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth
 To be answered only in event of Twins or Triplets
 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 14th 19 22
 (Name) (Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Eddie Gamble

(14) NAME BEFORE MARRIAGE Stacia Bells

(9) PRESENT POSTOFFICE OF FATHER Salters Depot. S.C.

(15) PRESENT POSTOFFICE OF MOTHER Salters Depot. S.C.

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 39 (Years)

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 28 (Years)

(12) BIRTHPLACE Williamsburg co. S.C.

(18) BIRTHPLACE Williamsburg co. S.C.

(13) OCCUPATION Farmer

(19) OCCUPATION farm laborer

(20) Number of children born to mother, including present birth: 7

(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 7.0 M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Scott
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Salters Depot. 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 Jan 18th 19 22 (28) W. M. Mosley 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.