

## (1) PLACE OF BIRTH

County of MarlboroTownship of Liberty

or

Inc. Town of .....

or

City of .....

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

1984

Registration District No. 3304Registered No. 15

(For use of Local Registrar)

St. .... Ward

## (2) Full Name of Child

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH Jan 22, 1984  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Colan Jacobs

(9) PRESENT POSTOFFICE OF FATHER

Clio S E

(10) COLOR OR RACE

col(11) AGE AT LAST BIRTHDAY 43  
(Years)

(12) BIRTHPLACE

S E

(13) OCCUPATION

Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE

Eunice Sallaway

(15) PRESENT POSTOFFICE OF MOTHER

Clio S E

(16) COLOR OR RACE

col(17) AGE AT LAST BIRTHDAY 36  
(Years)

(18) BIRTHPLACE

S E

(19) OCCUPATION

Laborer

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

11

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

7

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive on the date above stated.

(Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Midwife Cornelia Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed Jan 24, 1984(28) W. H. Woodley

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.