

WRITE PLAINLY, WITH ENOUGH INK TO BE READ BY CHILD, AND MARK THE
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 6
REGISTRATION DISTRICT, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Lancaster
Township of Clinton
or
Inc. Town of Clinton
or
City of

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

File No.—For State Registrar Only
13372

Registration District No. 24B Registered No. 45
(For use of Local Registrar)

(No. 39 Jefferson St. 6th Ward)
If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child no name If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? <u>boy</u>	4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	5) Number in order of birth	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>May 9th 1922</u> (Name of Month) (Day) (Year)
FATHER. 8) FULL NAME <u>Perry W. Campbell</u> 9) PRESENT POSTOFFICE OF FATHER <u>Clinton S.C.</u> 10) COLOR OR RACE <u>white</u> 11) AGE AT LAST BIRTHDAY <u>47</u> 12) BIRTHPLACE <u>S.C.</u> 13) OCCUPATION <u>Textile</u>			MOTHER. 14) NAME BEFORE MARRIAGE <u>Lucie Skipper</u> 15) PRESENT POSTOFFICE OF MOTHER <u>Clinton S.C.</u> 16) COLOR OR RACE <u>white</u> 17) AGE AT LAST BIRTHDAY <u>34</u> 18) BIRTHPLACE 19) OCCUPATION	
20) Number of children born to mother, including present birth <u>6</u>			21) Number of children of this mother now living, including present birth <u>4</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive 6:40 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. L. W. Bailey
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife Clinton 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 May 9th 1922 (28) J. L. W. Bailey 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.

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