CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only 13715

(1) PLACE OF BIRTH
County of Lancaster
Township of B. B.
or
Inc. Town of Olar S C
or
City of .....
(No. ..... St., ... Ward)
If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 401 Registered No. 61
(For use of Local Registrar)

(2) Full Name of Child ..... (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Girl
(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 5-8-1922 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME Henry Lecan Creech	(14) NAME BEFORE MARRIAGE Eliza Ann Mims
(9) PRESENT POSTOFFICE OF FATHER Olar S C	(15) PRESENT POSTOFFICE OF MOTHER Olar S.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 3 X (Years)	(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31 (Years)
(12) BIRTHPLACE S C	(18) BIRTHPLACE S C.
(13) OCCUPATION Farmer	(19) OCCUPATION Farmer Housewife
(20) Number of children born to mother, including present birth 5	(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 alive (Born alive or stillborn) at 9 P. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) C B Ray M D
(24) State whether Physician or Midwife Physician
(25) Address of Physician or Midwife Olar S C

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

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

(27) Filed June 8 1922 (28) J E Bennett 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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