

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

43096

County of Hershaw

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Township of Flat Rock

or Town of Westville

or City of

Registration District No. 2702

Registered No. 60

(For use of Local Registrar)

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

(2) Full Name of Child. Sandie Samuels

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

(6) Are Parents Married? yes

(7) DATE BIRTH Dec. 11, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Samuels

(9) PRESENT POSTOFFICE OF FATHER Westville

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 40 (Years)

(12) BIRTHPLACE County Hill S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth { 6

MOTHER.

(14) NAME BEFORE MARRIAGE Lilie Reid

(15) PRESENT POSTOFFICE OF MOTHER Westville

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 30 (Years)

(18) BIRTHPLACE Westville S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth { 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Harriet Truesdale

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Westville S.C. R. 1

Given name added from a supplemental report

(26) Witness Mrs Mike Jones

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

(27) Filed 1/10 1923 (28) J. H. Busfield 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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See Chapter of Columbia, No. 1, THE ORIGIN, No. 2, etc., in question 5.

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