

NATURAL REGISTERED FOR BIRTHING. WITH UNEXPANDED LINC.—THIS IS A PERMANENT RECORD. WHEN PLACED IN THE REGISTER, THE REGISTRAR USES A SEPARATE BLANK FOR EACH CHILD, AND MARKS THE CHILD'S NAME IN THE REGISTER. IN THE CASE OF A STILLBORN, NO. 2, ETC., IN QUESTION 2.

(1) PLACE OF BIRTH

County of Calhoun

Township of

or Inc. Town of St. Matthews

or City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

3303

Registration District No. 4A Registered No. 12
(For use of Local Registrar)

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

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? — (5) Number in order of birth — (6) Are Parents Married? yes (7) DATE OF BIRTH Feb 17, 1922
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME Connie Lester Keisler

(9) PRESENT POSTOFFICE OF FATHER St. Matthews, S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 29 (Years)

(12) BIRTHPLACE Lexington, S.C.

(13) OCCUPATION mechanic

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Wibbie Alberta Herling

(15) PRESENT POSTOFFICE OF MOTHER St. Matthews, S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Years)

(18) BIRTHPLACE St. Matthews, S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6:00 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Chas. H. Garing, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife St. Matthews, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by Physician)

(27) Filed 3, 10, 1922 (28) A. R. Able 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.

*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.