

MARGIN RESERVED FOR BINDING.  
WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
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 5.

(1) PLACE OF BIRTH

County of Richmond Co.  
Township of Richmond Hill  
OR  
Inc. Town of .....  
OR  
City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

28455

Registration District No. 104

Registered No. 62  
(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 Sally Sara Seal If child is not yet named, make supplemental report as directed

3) BOY OR GIRL Girl 4) Twin or Triplet? 1 5) Number in order of birth 1 6) Are Parents Married? Yes 7) DATE OF BIRTH Sept 25 1922  
(Name of Month) (Day) (Year)

FATHER.  
8) FULL NAME O. Seal  
9) PRESENT POSTOFFICE OF FATHER Texas  
10) COLOR OR RACE white 11) AGE AT LAST BIRTHDAY 34  
(Years)  
12) BIRTHPLACE Hancock Co. Tenn  
13) OCCUPATION Bohmer  
20) Number of children born to mother, including present birth 1

MOTHER.  
14) NAME BEFORE MARRIAGE Lula Virginia Walcott  
15) PRESENT POSTOFFICE OF MOTHER Abbeville S C  
16) COLOR OR RACE white 17) AGE AT LAST BIRTHDAY 32  
(Years)  
18) BIRTHPLACE Abb Co  
19) OCCUPATION House wife  
21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) J. S. [Signature]  
(24) State whether Physician or Midwife Phys. (25) Address of Physician or Midwife Abbeville 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 9/30 1922 (28) J. S. [Signature] 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.