

(1) PLACE OF BIRTH

County of Kershaw
 Township of D. K. Kell
 OR
 Inc. Town of
 OR
 City of Winter Mills

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

43074

Registration District No. 2201 Registered No. 2571
 (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 Annie Vermael Hatfield 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 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 21 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ronald L. Hatfield

(9) PRESENT POSTOFFICE OF FATHER Camden, S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28
 (Year)

(12) BIRTHPLACE Lex. Co., S.C.

(13) OCCUPATION Cotton Mill - Camden.

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

MOTHER.

(14) NAME BEFORE MARRIAGE Letha R. Hopkins

(15) PRESENT POSTOFFICE OF MOTHER Camden, S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23
 (Year)

(18) BIRTHPLACE Lex. Co., S.C.

(19) OCCUPATION Cotton Mill - Spool.

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 9:15 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

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

Given name added from a supplemental report

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

(27) Filed (28) (29) 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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