

## (1) PLACE OF BIRTH

County of Oconee  
 Township of Bowling  
 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

31600

Registration District No. 3602Registered No. 37  
(For use of Local Registrar)

City of ..... (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 Isaac Hoyle (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 OF BIRTH Sept 1, 1922  
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Isaac Hoyle(9) PRESENT POSTOFFICE OF FATHER Bowman S.C.(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Osby Geo(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 6

## MOTHER

(14) NAME BEFORE MARRIAGE Francis Cannon(15) PRESENT POSTOFFICE OF MOTHER Bowman S.C.(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 29 (Years)(18) BIRTHPLACE Calhoun Co(19) OCCUPATION Domestic(20) 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 Born Alive at 3 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Grina Hilliard

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

Given name added from a supplemental report

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

(27) Filed Sept 3, 1922 (28) Dr. H. Patrick 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 stillborns before the fifth month of pregnancy.