

Form No. 1

(1) PLACE OF BIRTH

County of Lantern
 Township of Clinton
 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

19265

Registration District No. a2904 Registered No. 63
 (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 Ella Bell Chappell

If child is not yet named, make supplemental report as directed

3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 22 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Leonway Chappell
 9) PRESENT POSTOFFICE OF FATHER Clinton S.C.
 10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 43
 12) BIRTHPLACE S.C. (Years)
 13) OCCUPATION Farming
 20) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Ella Chappell
 (15) PRESENT POSTOFFICE OF MOTHER Clinton S.C.
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 39
 (18) BIRTHPLACE S.C. (Years)
 (19) OCCUPATION House Keeping
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was.... alive at 11 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Laura Black(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Clinton 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 June 8 1922 (28) J. L. W. Bailey 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.