

(1) PLACE OF BIRTH

County of Dillon
 Township of Becher
 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

34119

Registration District No. 1666Registered No. 89
(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 Stephen Andrew Berry If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 8, 1922
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Stefford Berry
 (9) PRESENT POSTOFFICE OF FATHER Latta S.C. #2
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33
 (Years)
 (12) BIRTHPLACE Martins Co
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 5

MOTHER.
 (14) NAME BEFORE MARRIAGE Ida Pearson
 (15) PRESENT POSTOFFICE OF MOTHER Latta S.C. #2
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30
 (Years)
 (18) BIRTHPLACE Martins Co
 (19) OCCUPATION Housewife
 (21) 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 8 P.M. on the date above stated. (Termative or stillborn) (Hour M. or P.M.)(23) (Signature) H. A. Taylor(24) State whether Physician or Midwife (25) Address of Physician or Midwife Latta 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 Oct 12, 1922 (28) W. S. Rogers 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.