

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

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

31976

Registration District No. 3800

Registered No. 104
(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

Willie Ann Gadden

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

3. BOY OR GIRL?

Girl

4. Twin or Triplet?

To be answered only in event of Twins or Triplets

5. Number in order of birth

6. Are Parents Married?

No

7. DATE OF BIRTH

APR 5 1922
(Name of Month) (Day) (Year)

FATHER.

8. FULL NAME

9. PRESENT POSTOFFICE OF FATHER

10. COLOR OR RACE

11. AGE AT LAST BIRTHDAY

(Years)

12. BIRTHPLACE

13. OCCUPATION

20. Number of children born to mother, including present birth

3

MOTHER.

14. NAME BEFORE MARRIAGE

Lula Gadden

15. PRESENT POSTOFFICE OF MOTHER

Blythwood R.F.D.

16. COLOR OR RACE

Col

17. AGE AT LAST BIRTHDAY

38
(Years)

18. BIRTHPLACE

Richland Co.

19. OCCUPATION

Washerwoman

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 *8 P.M.* on the date above stated.
(Born alive or stillborn) (Hour *2* or P. M.)

(23) (Signature)

Emma Brewer

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Blythwood

Given name added from a supplemental report

(26) Witness

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

(27) Filed

APR 13 1922

(28) *Nancy Lee*
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.

NOTE: 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 make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECEIVED BY COLUMBIA, COLUMBIA, S. C.