

## (1) PLACE OF BIRTH

County of Spartanburg  
 Township of Cross Creek  
 or  
 Inc. Town of .....

## CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

16732

Registration District No. 4023Registered No. 41  
(For use of Local Registrar)

City of ..... St. .... Ward  
 (No. ....)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

## (2) Full Name of Child

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

## FATHER.

(8) FULL NAME Walter A. Cross(9) PRESENT POSTOFFICE OF FATHER X.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)(12) BIRTHPLACE Jefferson Co. Tenn(13) OCCUPATION Cotton Mill worker(20) Number of children born to mother, including present birth 6

## MOTHER.

(14) NAME BEFORE MARRIAGE Ida Rhinehart(15) PRESENT POSTOFFICE OF MOTHER Enoree S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34 (Years)(18) BIRTHPLACE Jefferson Co. Tenn(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 7 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) C. D. Hammett(24) State whether Physician

Physician or Midwife

(25) Address of Physician or Midwife Enoree 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 May 5 1922 (28) C. D. Hammett 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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