

1) PLACE OF BIRTH

County of Greenville

Township of Highland

or Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

28833

Registration District No. 2211

Registered No. 44
(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

Batis

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

SEX OF CHILD

Male

(4) Twin or triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH July 6 23
(Month of Month) (Day) (Year)

FATHER.

FULL NAME

W. H. Bates

PRESENT POSTOFFICE OF FATHER

Pigeonville S.C.

COLOR

White

(11) AGE AT LAST BIRTHDAY

24

RACE

White

BIRTHPLACE

S.C.

OCCUPATION

Farmer

Number of children born to mother, including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE

Dolly Rhodes

(15) PRESENT POSTOFFICE OF MOTHER

Pigeonville S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

20

(18) BIRTHPLACE

N.C.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(26) Witness

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

(27) Filed Sept. 23 1923

(28) S. J. Wilson Local Registrar

When name added from a supplemental report

191

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.

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.