

## (1) PLACE OF BIRTH

County of Madison  
 Township of Williamston  
 or Inc. Town of Belzer, S.C.  
 or City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

6404

Registration District No. 38Registered No. 46  
(For use of Local Registrar)

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

## (2) Full Name of Child

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? 2 (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH March 9, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME J. A. Leathers  
 (9) PRESENT POSTOFFICE OF FATHER Pelzer S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 42  
 (Year) (12) BIRTHPLACE Oconee County  
 (13) OCCUPATION Painter  
 (20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Icelandic Kelly  
 (15) PRESENT POSTOFFICE OF MOTHER Pelzer S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24  
 (Year) (18) BIRTHPLACE Anderson County  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was White at 5:30 P.M.,  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. R. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Pelzer 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 April 7, 1922 W. L. C. Shaw 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.