

NOTE.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

(1) PLACE OF BIRTH

County of Georgetown  
Township of 7th St.  
OR  
Inc. Town of Anders SC  
OR  
City of .....

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

File No.—For State Registrar Only

4220

Registration District No. 2103 Registered No. 28  
(For use of Local Registrar)

(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 Mary Vivian Norton (If child is not yet named, make supplemental report as directed)

(3) SEX OF GIRL? Female (4) Twin or Triplet? No (5) Number in order of birth: 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 18, 1922  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Robert Calhoun Norton  
(9) PRESENT POSTOFFICE OF FATHER Anders SC  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)  
(12) BIRTHPLACE Berkely Co. SC  
(13) OCCUPATION Blacksmith

MOTHER.  
(14) NAME BEFORE MARRIAGE Anna Clyde Barwick  
(15) PRESENT POSTOFFICE OF MOTHER Anders SC  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)  
(18) BIRTHPLACE Georgetown Co. SC  
(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 3 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 4 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) R.C. Norton  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Anders SC

Given name added from a supplemental report

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

(27) Filed Feb. 22, 1922 (28) R.W. Bailey 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.