

## (1) PLACE OF BIRTH

County of ChesterTownship of Chesteror  
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

14230

Registration District No. 1107 Registered No. 62

(For use of Local Registrar)

City of ..... (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 Cornell Chisolm If child is not yet named, make supplemental report as directed3) BOY OR GIRL? Girl (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? Yes(7) DATE OF BIRTH May 8 1922 (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Sam Chisolm(9) PRESENT POSTOFFICE OF FATHER Chester(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE Chester County(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 1

## MOTHER

(14) NAME BEFORE MARRIAGE Anna Brown(15) PRESENT POSTOFFICE OF MOTHER Chester S.C.(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 17 (Years)(18) BIRTHPLACE Richland Co.(19) OCCUPATION Domestic(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 1 P. M., on the date above stated. (Born alive or stillborn) (Hour/A. M. or P. M.)(23) (Signature) T. H. Welles(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Chester

Given name added from a supplemental report

(26) Witness M. Todd (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed 6-5-22 (28) J. H. S. Lure 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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