

(1) PLACE OF BIRTH

County of Hampton
 Township of Yafford
 OR
 Inc. Town of Yafford
 OR
 City of

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

30626

Registration District No. 2410Registered No. 120
(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 Ellen Sweet

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

(3) BOY OR GIRL boy (4) Twin or Triplet? No (5) Number in order of birth 4 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 25 1922
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ed die Sweet
 (9) PRESENT POSTOFFICE OF FATHER Yafford
 (10) COLOR OR RACE Color (11) AGE AT LAST BIRTHDAY 30
 (12) BIRTHPLACE Yafford, S.C.
 (13) OCCUPATION Public Work

MOTHER.

(14) NAME BEFORE MARRIAGE Annie Halligan
 (15) PRESENT POSTOFFICE OF MOTHER Yafford S.C.
 (16) COLOR OR RACE Color (17) AGE AT LAST BIRTHDAY 30
 (18) BIRTHPLACE Savannah Ga.
 (19) OCCUPATION house keeper

(20) Number of children born to mother, including present birth 4 (21) Number of children of this mother now living, including present birth four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 6:00 P. M., on the date above stated Yafford S.C. (Hour A. M. or P. M.)

(23) (Signature) Mid wife Yafford S.C.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 9.30 1922 (28) H. E. Jackson
 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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W. E. L. R.