

## (1) PLACE OF BIRTH

County of Orange  
 Township of Center  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St. .... Ward ....)

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

File No. - For State Registrar Only  
**8589**

Registration District No. 8501Registered No. 35  
(For use of Local Registrar)

## (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?

To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Feb. 6 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Clorence E. Mize

(9) PRESENT POSTOFFICE OF FATHER

Westminster, S.C. Rt. 3

(10) COLOR OR RACE

White(11) AGE AT LAST BIRTHDAY 30  
(Year)

(12) BIRTHPLACE

Orange

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

1st

## MOTHER.

(14) NAME BEFORE MARRIAGE

Bessie Mae Brock

(15) PRESENT POSTOFFICE OF MOTHER

Same

(16) COLOR OR RACE

White(17) AGE AT LAST BIRTHDAY 28  
(Year)

(18) BIRTHPLACE

Orange

(19) OCCUPATION

House wife

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

one

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 24.5 hrs. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

F. T. Simpson, M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Westminster, S.C.

Given name added from a supplemental report

(20) Witness

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

(27) Filed

March 15 1922

(28)

F. P. Martin

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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BECAUSE OF COLUMBIA, COLUMBIA, S. C. 1922  
 N. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.