

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
36424

(1) PLACE OF BIRTH

County of Spartanburg
Township of Carrysville
OR
Inc. Town of
OR
City of

Registration District No. H.O.1 Registered No. 98
(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 Harold Pearce If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH July 21, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Thos Pearce
(9) PRESENT POSTOFFICE OF FATHER Laudrum S.C. #2
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28
(Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 4

MOTHER.
(14) NAME BEFORE MARRIAGE Rebecca Lockhart
(15) PRESENT POSTOFFICE OF MOTHER Laudrum S.C. #2
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21
(Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Housewife
(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 alive at 9 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. E. Wood
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Carrysville S.C.

Given name added from a supplemental report
..... 19

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 10-31-22 (28) C. L. Mayberry 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.

MARGIN RESERVED FOR BINDING.
WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and ink the FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.
BUREAU OF VITAL STATISTICS, COLUMBIA, S. C.