

(1) PLACE OF BIRTH

County of Anderson
 Township of Bruskey Creek
 or
 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
17509

Registration District No 30.2 Registered No. 56
 (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 William P. Davis (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 1st (6) Are Parents Married? No (7) DATE OF BIRTH June 7, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Pinkney Gambel

(9) PRESENT POSTOFFICE OF FATHER Asley

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 18
 (Years)

(12) BIRTHPLACE Acana County

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE William May Jarrett

(15) PRESENT POSTOFFICE OF MOTHER Asley

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 17
 (Years)

(18) BIRTHPLACE Bruskey Creek Townships

(19) OCCUPATION House keeping

(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 M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Matie Richardson

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Matie Richardson Piedmont St.

Given name added from a supplemental report

James O. Jarrett

(26) Witness

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

(27) Filed June 14, 1922 (28) J. K. W. Taylor 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 be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.