

1. In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Lancaster
Township of Waxhaw
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH

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

No. for State Registrar Only
4373

Registration District No. 2507 Registered No. 3
(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 Mary Alice Parnell If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Age of Parents yes (7) DATE OF BIRTH Jan 24 1923
(Month of Month) (Day) (Year)

FATHER
(8) FULL NAME Ben Walker Parnell
(9) PRESENT POSTOFFICE OF FATHER Riverside L.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 50
(12) BIRTHPLACE Debarre L. Co. S.C.
(13) OCCUPATION Farmer
(14) Number of children born to mother, including present birth 4

MOTHER
(15) NAME BEFORE MARRIAGE Lilly Hoile
(16) PRESENT POSTOFFICE OF MOTHER Riverside L.C.
(18) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 40
(19) BIRTHPLACE Lancaster Co. S.C.
(20) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was M., on the date above stated. (Born alive or stillborn) (M. or F. M.)

(23) (Signature) J. H. Ezelle
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Waxhaw N.C.

Given name and date of registration of the subject
Daniel S. Young
May 22

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
(27) Filed Feb 28 1923 (28) J. H. Ezelle Local Registrar

*When the birth is attended by a physician or midwife, then the father, householder, etc., should make this return. If a child is born dead, it need not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.