

(1) PLACE OF BIRTH

County of Chester
Township of Lynchville
OR
Inc. Town of Landis
OR
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

25409

Registration District No. 1106 Registered No. 87
(For use of Local Registrar)

City of (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

{ 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 Twins or Triplets (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 23, 1922
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

8) FULL NAME J. V. Pittman

(14) NAME BEFORE MARRIAGE Annie M Garity

9) PRESENT POSTOFFICE OF FATHER Landis S.C.

(15) PRESENT POSTOFFICE OF MOTHER Landis S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 23
(Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 19
(Years)

12) BIRTHPLACE Pa

(18) BIRTHPLACE Chester County

13) OCCUPATION Mill Operator

(19) OCCUPATION Domestic

20) Number of children born to mother, including present birth 2

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at 3 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P.M.)

(23) (Signature) J. N. Gustin

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Landis S.C.

Given name added from a supplemental report

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

(27) Filed 8/19 19 22 (28) J. H. Hollis 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.

Registrar 1 Local Registrar.

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