

WRITE 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 mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Chester
Township of Wabesville
or
Inc. Town of.....
or
City of.....
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only

735

Registration District No. 1104 Registered No. 1
(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 Andrew Beatty (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 4 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 19 1922
(Day) (Year)

FATHER.

(8) FULL NAME Joe Beatty
(9) PRESENT POSTOFFICE OF FATHER Chester, S.C. R # 2
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 29 (Years)
(12) BIRTHPLACE Chester County
(13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Lucile Jeter
(15) PRESENT POSTOFFICE OF MOTHER Chester, S.C. R # 2
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 22 (Years)
(18) BIRTHPLACE Union County
(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 born at 6 P.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Rena Glen

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 24 is signed by mark)

(27) Filed Jan 22 1922 (28) M. T. McDaniel 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.