

## (1) PLACE OF BIRTH

County of UnionTownship of Unionor  
Inc. Town of .....or  
City of .....(No. .... St.; .... Ward)  
(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

36690

Registration District No. 4207 Registered No. 72  
(For use of Local Registrar)(2) Full Name of Child Ernest B. Lee (If child is not yet named, make supplemental report as directed)(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH July 13, 1922  
(Month) (Day) (Year)

FATHER.			MOTHER.		
(8) FULL NAME	<u>Herbert A. Lee</u>	(14) NAME BEFORE MARRIAGE	<u>May Sweet</u>		
(9) PRESENT POSTOFFICE OF FATHER	<u>R.F.D. #3 Union S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER	<u>R.F.D. #1 Union S.C.</u>		
(10) COLOR OR RACE	<u>White</u>	(16) COLOR OR RACE	<u>White</u>	(11) AGE AT LAST BIRTHDAY	<u>32</u> (Years)
(12) BIRTHPLACE	<u>Chester S.C.</u>	(18) BIRTHPLACE	<u>Georgia</u>	(17) AGE AT LAST BIRTHDAY	<u>28</u> (Years)
(13) OCCUPATION	<u>Cotton Mill Work</u>	(19) OCCUPATION	<u>Domestic</u>		
(20) Number of children born to mother, including present birth	<u>11</u>	(21) Number of children of this mother now living, including present birth	<u>11</u>		

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Male at 11-10 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) [Signature] (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Union S.C.

Given name added from a supplemental report

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

(27) Filed 11-10 1922 (28) D. G. Sarratt 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.