

MARGIN RESERVED FOR BINDING.  
 WITH PLAIN, WITH SPACING INITIALS IN A PERMANENT RECORD  
 IN CASE OF DEATH, THE NAME OF THE CHILD, AND MARK THE  
 PHENOMENON, NO. 2, etc., in question 6

(1) PLACE OF BIRTH

County of Spokane  
 Township of Lampas  
 or  
 Inc. Town of .....

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

2471

Registration District No. 40-C

Registered No. 12  
 (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 Amey May Caldwell

If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL Girl (4) Twin or Triplet? No (3) Number in order of birth 1 (5) Are Parents Married? yes (7) DATE OF BIRTH Jan 31 1922  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER  
 (8) FULL NAME Aubrey Caldwell  
 (9) PRESENT POSTOFFICE OF FATHER Immanus P. H.  
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 40  
 (12) BIRTHPLACE Spts Co. S.C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 3

MOTHER  
 (14) NAME BEFORE MARRIAGE Kate Denton  
 (15) PRESENT POSTOFFICE OF MOTHER Immanus P. H.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34  
 (18) BIRTHPLACE N. C.  
 (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 alive at 6 P. M. on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature) W. J. Stephens

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

Given name added from a supplemental report

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

(27) Filed Feb 1 1922 (28) W. J. Stephens 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.