

BE CAREFUL WITH HANDWRITING—THIS IS A PERMANENT RECORD.
 IN CASE OF TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
 FIRST-BORN, No. 1. THIS OFFICIAL, No. 2, etc., in question 8.
 RECORD OF CALDWELL, CALDWELL, N. C.

(1) PLACE OF BIRTH

County of Cherokee
 Township of Cherokee
 or
 Inc. Town of
 or
 City of Cherokee

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

File No.—For State Registrar Only

3561

Registration District No. 10003 Registered No. 14
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St. Ward)

(2) Full Name of Child Charles Henry May (If child is not yet named, make supplemental report as directed)

(1) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Sex Male DATE OF BIRTH Feb. 17, 1922
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER				MOTHER			
(7) FULL NAME	<u>Willie May</u>			(14) NAME BEFORE MARRIAGE	<u>Emma Bessie Heath</u>		
(8) PRESENT POSTOFFICE OF FATHER	<u>Kings Creek S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER	<u>Kings Creek S.C.</u>		
(10) COLOR OR RACE	<u>White</u>	(11) AGE AT LAST BIRTHDAY	<u>24</u> (Years)	(16) COLOR OR RACE	<u>White</u>	(17) AGE AT LAST BIRTHDAY	<u>19</u> (Years)
(12) BIRTHPLACE	<u>Mark Co S.C.</u>			(18) BIRTHPLACE	<u>Mark Co S.C.</u>		
(13) OCCUPATION	<u>Farmer</u>			(19) OCCUPATION	<u>Housewife</u>		
(20) Number of children born to mother, including present birth	<u>1</u>			(21) Number of children of this mother now living, including present birth	<u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 2 A. M. on the date above stated. (Normally or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) B. N. Miller M.D.

(24) State whether Physician or Midwife: Physician (25) Address of Physician or Midwife: Physician Hickory Grove

Given name added from a supplemental report

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

(27) Filed Mar. 7, 1922 (28) J. A. H. H. H. 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.