

## (1) PLACE OF BIRTH

County of Strom  
 Township of Green Sea  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

19039

Registration District No. 2506Registered No. 57  
(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

Lewis Austin

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

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH

June 3 22

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Lawrence Skelley

(9) PRESENT POSTOFFICE OF FATHER

Labor N.C. #2

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

40

(Years)

(12) BIRTHPLACE

Strom, C.S.C.

(13) OCCUPATION

Farming

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

5

## MOTHER.

(14) NAME BEFORE MARRIAGE

Gertrude Fowler

(15) PRESENT POSTOFFICE OF MOTHER

Labor N.C. #2

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

20

(Years)

(18) BIRTHPLACE

Strom, C.S.C.

(19) OCCUPATION

House Wife

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 6:50 A.M.,  
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Labor N.C. #2

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 10 1922

(28)

G. R. Lippert

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

Local Registrar

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