

Form No. 1

## (1) PLACE OF BIRTH

County of Marion  
 Township of Red Bank  
 Inc. Town of McCall  
 City of McCall

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

18501

Registration District No. 330Registered No. 87

(For use of Local Registrar)

City of McCall (No. 1 St. 1 Ward 1)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

3) SEX OF CHILD Boy (4) Twin or Triplet No (5) Status in order of birth 1st (6) Age at birth 0 (7) DATE OF BIRTH June 20, 1922  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

## FATHER.

8) FULL NAME John Arch Lewis  
 9) PRESENT POSTOFFICE OF FATHER McCall SC  
 10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31 (Year)  
 12) BIRTHPLACE Montgomery Co NC  
 13) OCCUPATION Painter

## MOTHER.

14) FULL NAME Mary Nancy Lewis  
 15) PRESENT POSTOFFICE OF MOTHER McCall SC  
 16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32 (Year)  
 18) BIRTHPLACE Scotland Co NC  
 19) OCCUPATION Domestic

20) Number of children born to mother, including present birth 5

21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6:20 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Douglas H. Harris

(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 23 is signed by mark)

(27) Filed

June 20, 1922

(28)

J. H. Neathery

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.