

(1) PLACE OF BIRTH

County of ClarendonTownship of Calvary

or

Inc. Town of

City of Pine Wood, S.C.

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Bulah Margret ChewingFile No.—For State Registrar Only
24015

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthRegistration District No. 1291 Registered No. 31
(For use of Local Registrar)

(No. St.; Ward)

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

(3) SEX OR GUILD <u>Girl</u>	(4) Twin or Triplet To be answered only in case of Twin or Triplet	(5) Number in order of birth	(6) Age at Birth Months Years	(7) DATE OF BIRTH Month Day Year <u>Aug 27 1923</u>
---------------------------------	---	------------------------------	----------------------------------	---

FATHER.

(8) FULL NAME
Leland Chewing(9) PRESENT POSTOFFICE OF FATHER
Pine Wood S.C.(10) COLOR OR RACE
White (11) AGE AT LAST BIRTHDAY 29 (Years)(12) BIRTHPLACE
S.C.(13) OCCUPATION
Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE
Alma Felder(15) PRESENT POSTOFFICE OF MOTHER
Pine Wood, S.C.(16) COLOR OR RACE
White (17) AGE AT LAST BIRTHDAY 36 (Years)(18) BIRTHPLACE
S.C.(19) OCCUPATION
Domestic

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was ... born alive ... at ... 7 ...
on the date above stated. (Hour A. M. or P. M.)

(22) (Signature)

(23) State whether Physician or Midwife

Physician

(24) Address of Physician or Midwife

Pine Wood, S.C.

Given name added from a supplemental report

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

(26) Filed Sept 19 1923 (27) E. S. Kline 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.