

Form No. 1

## (1) PLACE OF BIRTH

County of 21stTownship of Catawba

or

Inc. Town of .....

or

City of .....

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

Registration District No. 4405 Registered No. 88  
(For use of Local Registrar)(2) Full Name of Child Will May Hunt

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

(3) BOY OR GIRL?

girl

(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

Sept 211922

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Wm B. Hunt

(9) PRESENT POSTOFFICE OF FATHER

Rock Hill

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

40  
(Years)

(12) BIRTHPLACE

SC.

(13) OCCUPATION

Farmer

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

6

## MOTHER.

(14) NAME BEFORE MARRIAGE

Mary Esie Ligon

(15) PRESENT POSTOFFICE OF MOTHER

Rock Hill SC

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

29  
(Years)

(18) BIRTHPLACE

SC.

(19) OCCUPATION

Housewife

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

6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

Rosa Esie

(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 10/21 19 22 (28) J. C. Smith  
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.

MAKING PRESERVED FOR RECORDING  
 WITH EXISTING RECORDS IS A PERMANENT RECORD.  
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.

RECORD OF COLUMBIA, Columbia, S. C.