

THIS SPACE IS TO BE LEFT BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THIS CHILD, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Chester
 Township of Halsellville
 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

10494

Registration District No. 1104 Registered No. 12
 (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 Gladys Smith

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

(3) BOY OR GIRL girl (4) Twin or Triplet? ✓ (5) Number in order of birth 7 (6) Are Parents Married? yes (7) DATE OF BIRTH Apr. 13, 1922
 (Name) (Month) (Day) (Year)

FATHER.

(8) FULL NAME Bessie Smith
 (9) PRESENT POSTOFFICE OF FATHER Leeds D.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 36
 (Year) (12) BIRTHPLACE Fairfield Co.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Mamie Crosby
 (15) PRESENT POSTOFFICE OF MOTHER Leeds D.C.
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 28
 (Year) (18) BIRTHPLACE Chester Co.
 (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 alive 12 at noon on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Everett Grady
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Leeds D.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Apr. 23, 1922 (28) St. P. M. S. Smith
 Registrar 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.