

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Beech Springs
 or
 Inc. Town of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

32217

Registration District No. 400 BRegistered No. 53

(For use of Local Registrar)

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

(2) Full Name of Child Virginia Carol Smith (If child is not yet named, make supplemental report as directed)

3 SEX OR GIRL girl 4 Twin or Triplet? 5 Number in order of birth 6 Are Parents Married? Yes 7 DATE OF BIRTH Sept 18, 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 8 FULL NAME Carroll Smith
 9 PRESENT POSTOFFICE OF FATHER Lucasburg, D.C.
 10 COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27
 (Years)
 12 BIRTHPLACE Spartanburg, D.C.
 13 OCCUPATION mill work
 20 Number of children born to mother, including present birth Five

MOTHER.
 14 NAME BEFORE MARRIAGE Florence Cathers
 15 PRESENT POSTOFFICE OF MOTHER Lucasburg, D.C.
 16 COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25
 (Years)
 18 BIRTHPLACE Spartanburg, D.C.
 19 OCCUPATION Housewife
 21 Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 9 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) P. B. Moore(24) State whether Physician or Midwife Phys(25) Address of Physician or Midwife Lucasburg, 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 Oct 1, 19 22 (28) P. B. Moore 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.