

(1) PLACE OF BIRTH

County of Chester
 Township of Blackstock
 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

10471

Registration District No. 1101 Registered No. 11
 (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 Daisy Halsey

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

(3) BOY OR GIRL (4) Twins or Triplets? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 4, 1922
 (Line of Month / Day / Year)

FATHER.

(8) FULL NAME Robert Halsey
 (9) PRESENT POSTOFFICE OF FATHER Chester S.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 45
 (Year)
 (12) BIRTHPLACE Chester Co
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth Six

MOTHER.

(14) NAME BEFORE MARRIAGE Rosy Strong
 (15) PRESENT POSTOFFICE OF MOTHER Chester S.C.
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 36
 (Year)
 (18) BIRTHPLACE Fairfield Co
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth Six

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was Alive at 4 A. M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sylvia Parrott

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Blackstock S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Feb. 4, 1922

(28)

R. C. Grant

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.

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