

WRITE PLAINLY, WITH UNFADING INK. 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.

(1) PLACE OF BIRTH

County of Newby  
Township of Mamula  
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.)

(2) Full Name of Child

Estelle Satterwhite

File No.—For State Registrar Only  
**43840**

Registration District No. 3407 Registered No. 62  
(For use of Local Registrar)

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH Dec 2, 22  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jim Satterwhite  
(9) PRESENT POSTOFFICE OF FATHER Sherburne R 2  
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 20  
(12) BIRTHPLACE S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Rosie Lee Hardin  
(15) PRESENT POSTOFFICE OF MOTHER Sherburne R 2  
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 15  
(18) BIRTHPLACE S.C.  
(19) OCCUPATION Farmer's Wif  
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 4:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Marion Harts (24) State whether Physician or Midwife (25) Address of Physician or Midwife Sherburne R 2

Given name added from a supplemental report

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

(27) Filed Dec 9, 1922 (28) J. L. Holliday 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.