

(1) PLACE OF BIRTH

County of Greenville
 Township of Auster
 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

42635

Registration District No. 2200 Registered No. 157
 (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

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 14, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Palmer Carnell

(9) PRESENT POSTOFFICE OF FATHER Simpsonville

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32
 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Ma. Fowler

(15) PRESENT POSTOFFICE OF MOTHER Simpsonville

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27
 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... Alive ... at 14 P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) L. L. Richardson (24) State whether Physician or Midwife Midwife

(25) Address of Physic. or Midwife Simpsonville

Given name added from a supplement-
 al report

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

(27) Filed Jan. 12, 1923 (28) L. L. Richardson
 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.