

(1) PLACE OF BIRTH

County of Anderson
 Township of Pinckney Creek
 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

13584

Registration District No. 302Registered No. 47
(For use of Local Registrar)

(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 William Lydell Smith

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

(3) BOY OR GIRL (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH May 8, 1922
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ernest Lydell Smith
 (9) PRESENT POSTOFFICE OF FATHER Easley, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31 (Years)
 (12) BIRTHPLACE Pickens Co., S.C.
 (13) OCCUPATION Textile worker

MOTHER.

(14) NAME BEFORE MARRIAGE Jessie Mae Tinsley
 (15) PRESENT POSTOFFICE OF MOTHER Easley, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)
 (18) BIRTHPLACE Pennsylvania Co., N.C.
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 1 2 (21) Number of children of this mother now living, including present birth 1 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) J.C. Pepper M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Easley, S.C., P.H. 5.

Given name added from a supplemental report.

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed June 8, 1922 (28) J.R. Water 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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