

(1) PLACE OF BIRTH

County of CherokeeTownship of Deludaor
Inc. Town of

City of

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

Registration District No. 3111

File No.—For State Registrar Only

43579Registered No. 47
(For use of Local Registrar)(No. 1 of 1 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 Willie May

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

(3) BOY OR GIRL? girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH Dec 7 1922
(Name of Month) (Day) (Year)**FATHER.**(8) FULL NAME Jonas Amick(9) PRESENT POSTOFFICE OF FATHER Little Mountain S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 23
(Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 2**MOTHER.**(14) NAME BEFORE MARRIAGE Bertha Nattiwanger(15) PRESENT POSTOFFICE OF MOTHER Little Mountain S.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 22
(Years)(18) BIRTHPLACE S.C.(19) OCCUPATION House wife(20) Number of children of this mother now living, including present birth 2**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE***(22) I hereby certify that I attended the birth of this child, who was Born alive at 12 M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) Emma Bowman Mid

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Chapin 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 Dec 15 1922 (28) J. W. Sanger
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.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FORM EACH CHILD, and
 FIRST-BORN, No. 1. THIS OTHER, No. 2, etc., in question 5.

MOGAW OF COLUMBIA, COLUMBIA, S. C.