

Form No. 1

(1) PLACE OF BIRTH

County of Clarendon
 Township of St. James
 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

29714

Registration District No. 1809Registered No. 48
(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

Reddy Pearson

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 Sept 21 22
(Name, Month) (Day) (Year)

FATHER.

(8) FULL NAME

Henry Pearson

(9) PRESENT POSTOFFICE OF FATHER

Davis Sta S C

(10) COLOR OR RACE

Col(11) AGE AT LAST BIRTHDAY 25
(Years)

(12) BIRTHPLACE

Clarendon Co

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Lilly Pearson

(15) PRESENT POSTOFFICE OF MOTHER

Davis Sta S C

(16) COLOR OR RACE

Col(17) AGE AT LAST BIRTHDAY 26
(Years)

(18) BIRTHPLACE

Clarendon Co

(19) OCCUPATION

Home & Field

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

6

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

6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Sena Louis

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Davis Sta S C

Given name added from a supplemental report

(26) Witness

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

(27) Date

Sept 30 1922

(28)

H. E. Nicholson
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.