

(1) PLACE OF BIRTH

County of Abbeville CoTownship of Bull Pondor
Inc. Town of.....or
City of.....(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

6343

Registration District No. 4603 Registered No. 18
(For use of Local Registrar)

(2) Full Name of Child

Florretta Warner

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

(3) BOY OR GIRL Girl(4) Twin or Triplet?
To be answered only in event of Twins or Triplets(5) Number in order of birth 5(6) Are Parents Married? Yes(7) DATE OF BIRTH Mar. 10 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Jerrie Warner

(9) PRESENT POSTOFFICE OF FATHER

Abbeville

(10) COLOR OR RACE

Black(11) AGE AT LAST BIRTHDAY 40
(Years)

(12) BIRTHPLACE

Bull Pond

(13) OCCUPATION

Farmer

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

5

MOTHER.

(14) NAME BEFORE MARRIAGE

Julia Green

(15) PRESENT POSTOFFICE OF MOTHER

Abbeville

(16) COLOR OR RACE

Black(17) AGE AT LAST BIRTHDAY 23
(Years)

(18) BIRTHPLACE

Bull Pond

(19) OCCUPATION

Farmer

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was March 10 at 10 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Maria Harden

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Abbeville S.C.

Given name added from a supplemental report

(26) Witness

Mrs. L. B. Hall

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

(27) Filed

March 10 1922

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.19 ..
Registrar

(27) Filed

March 10 1922

(28)

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.