

## (1) PLACE OF BIRTH

County of GreenwoodTownship of Greenwoodor  
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

30576

Registration District No. 2.306 Registered No. 133

(For use of Local Registrar)

(No. .... Ward)

(2) Full Name of Child Claude Marshall Rushton If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>7</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Sept 24 1922</u> (Name Month) (Day) (Year)
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FATHER.

(8) FULL NAME James Franklin Rushton

(9) PRESENT POSTOFFICE OF FATHER Greenwood, S.C.

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 40  
(Years)

(12) BIRTHPLACE SC

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Leila Belle Henderson

(15) PRESENT POSTOFFICE OF MOTHER Greenwood, SC

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY 38  
(Years)

(18) BIRTHPLACE McBee, S.C.

(19) OCCUPATION Domestic

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

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2:29 P.M. on the date above stated. (Born alive or stillborn) (Hour, M., or P.M.)

(23) (Signature) Dr. Marshall

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Greenwood, SC

Given name added from a supplemental report.

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

(27) Filed Oct 11 1922 (28) H. Brooks 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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