

17367

(1) PLACE OF BIRTH

County of Aiken
 Township of Rocky Spring
 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

17367

Registration District No. 216 Registered No. 30
 (For use of Local Registrar)

City of (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 Oscar Steadman (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH June 11, 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Oscar Steadman(9) PRESENT POSTOFFICE OF FATHER Earle(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 20
 (Years)(12) BIRTHPLACE Earle(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Florine Lyles(15) PRESENT POSTOFFICE OF MOTHER Earle(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 18
 (Years)(18) BIRTHPLACE Aiken(19) OCCUPATION Farming(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 2 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Maths Miller Wapner S.C.(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Spring

Given name added from a supplemental report

(26) Witness Lillian Bonifant
 (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed June 14, 1922 (28) J. H. Pool
 Registrar 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.