

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

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

(1) PLACE OF BIRTH

County of Charlotte  
 Township of .....  
 or  
 Inc. Town of .....  
 or  
 City of Charlotte

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

File No.—For State Registrar Only

589

Registration District No. 2A

Registered No. 171  
 (For use of Local Registrar)

St.; ..... Ward)

(2) Full Name of Child Boeth H Vance

(3) SEX OF CHILD Male  
 (4) Twin or Triplet? No  
 (5) Number in order of birth 1  
 To be answered only in case of Twins or Triplets

(6) Are you a Mother? Yes  
 DATE OF BIRTH July 11, 1922  
 (Name of Mother) (Day) (Year)

MOTHER.

FATHER.  
 (10) FULL NAME James Lee Causey  
 (11) PRESENT POSTOFFICE OF FATHER 296 Mudung St  
 (12) COLOR OR RACE White  
 (13) AGE AT LAST BIRTHDAY 27 (Years)  
 (14) BIRTHPLACE SC  
 (15) OCCUPATION Gas Engineer

(16) NAME BEFORE MARRIAGE Boeth H Vance  
 (17) PRESENT POSTOFFICE OF MOTHER 296 Mudung St  
 (18) COLOR OR RACE White  
 (19) AGE AT LAST BIRTHDAY 21 (Years)  
 (20) BIRTHPLACE SC  
 (21) OCCUPATION Housewife  
 (22) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was born alive at 1:35 P.M. on the date above stated. (Hour A. M. or P. M.)

(24) (Signature) James A. Nelson  
 (25) State whether Physician or Midwife Phys  
 (26) Address of Physician or Midwife Union Church Bldg

Given name added from a supplemental report

(27) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mother)  
 (28) Filed 2/5 19 22 2 15  
 Registrar J. M. ...

\*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.