

(1) PLACE OF BIRTH

County of Horry
 Township of Green Sea
 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

30758

Registration District No. 2506 Registered No. 94
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Howard H. Wearil 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 1st (6) Are Parents Married Yes (7) DATE OF BIRTH Sept 23, 22
 To be answered only in case of Twins or Triplets (Name) (Month) (Day) (Year)

FATHER.
 (9) FULL NAME H. C. Wearil
 (9) PRESENT POSTOFFICE OF FATHER Ham Bluff, Me.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 23 (Years)
 (12) BIRTHPLACE Horry Co., S.C.
 (13) OCCUPATION Public Work

MOTHER.
 (14) NAME BEFORE MARRIAGE Russell Russell
 (15) PRESENT POSTOFFICE OF MOTHER Ham Bluff, Me.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)
 (18) BIRTHPLACE Horry Co., S.C.
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 2 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Dallas E. McRae
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Ham Bluff, Me.

Given name added from a supplemental report

(26) Witness Mrs. W. R. Taylor (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Sept 26, 1922 (28) Chas. B. S. H. 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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