

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

File No.—For State Registrar Only
18646

(1) PLACE OF BIRTH

County of Florence
Township of Matto
or
Inc. Town of.....
or
City of.....

Registration District No. 2012 Registered No. 39
(For use of Local Registrar)

(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

Resia Graham 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 3 (6) Are Parents Married? yes (7) DATE OF BIRTH.....May 22 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wilson Graham
(9) PRESENT POSTOFFICE OF FATHER Charlottesville
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY...28.....
(Years)
(12) BIRTHPLACE Florence Co SC
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Resia Rose
(15) PRESENT POSTOFFICE OF MOTHER Charlottesville
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY...25.....
(Years)
(18) BIRTHPLACE Sumter Co
(19) OCCUPATION House Wife
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was.....born.....at.....3 P. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. D. Kelly

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Charlottesville

Given name added from a supplemental report

(26) Witness

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

(27) Filed 9/8 1922(28) A. D. Kelly 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.