

Form No. 1

(1) PLACE OF BIRTH

County of Wellhamburg
 Township of Seiler
 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

32682

Registration District No 4310Registered No. 25
(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 Louisa Bray boy If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sep 1 1922
 (Name) (Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Henry Montgomery(14) NAME BEFORE MARRIAGE Louisa Bray boy(9) PRESENT POSTOFFICE OF FATHER Lake City SC(15) PRESENT POSTOFFICE OF MOTHER Lake City SC(10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 22 (Years)(16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 20 (Years)(12) BIRTHPLACE SC(18) BIRTHPLACE SC(13) OCCUPATION Farmer(19) OCCUPATION House(20) Number of children born to mother, including present birth 1(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 3 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Fannie Moore(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Lake City SC

Given name added from a supplemental report

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

(27) Filed Sept 12 1922 (28) Mrs W A Fitch 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.

IN THIS IS A PERMANENT RECORD.
 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.

DEPT. OF COLUMBIA, COLUMBIA, S. C.