

## (1) PLACE OF BIRTH

County of Marlboro

Township of .....

or

Inc. Town of .....

or

City of .....

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

(2) Full Name of Child Harriet Cassie Stanton (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>✓</u> To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 10 22</u> (Name of Month) (Day) (Year)
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## FATHER.

(8) FULL NAME Rufus Stanton(9) PRESENT POSTOFFICE OF FATHER Clis, S.C. R. 25.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)(12) BIRTHPLACE Marlboro Co(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Leola Smith(15) PRESENT POSTOFFICE OF MOTHER Clis S.C. R. 24.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE Licken Co.(19) OCCUPATION Housewife(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 Born alive at 4:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) A. Mahoney

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Clis S.C.

Given name added from a supplemental report

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

(27) Filed Jan 5 1922 (28) W. H. Woodley 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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## CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

43762

Registration District No. 335 Registered No. 108  
(For use of Local Registrar)

(No. .... St.; .... Ward)

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