

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

File No.—For State Registrar Only

16586

## (1) PLACE OF BIRTH

County of SalmdaTownship of # 2

or

Inc. Town of .....

or

City of .....

Registration District No. 3901 Registered No. 41  
(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 Joyce Mathews If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
	To be answered only in event of Twins or Triplets		<u>yes</u>	<u>Mar. 5, 1922</u> (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Whisman Mathews(9) PRESENT POSTOFFICE OF FATHER Batesburg(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)(12) BIRTHPLACE Salmda Co(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Ethel Dehardt(15) PRESENT POSTOFFICE OF MOTHER Batesburg(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21 (Years)(18) BIRTHPLACE Salmda 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 alive at 10 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) H. L. Able(24) State whether Physician or Midwife Phy(25) Address of Physician or Midwife Batesburg

Given name added from a supplemental report

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

(27) Filed June 3, 1922 (28) F. H. Brouch 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.