

Form No. 1

PLACE OF BIRTH

County of *Sevier Co.*Township of *Westerly*

Incl. Town of

City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

9309

Registration District No. *4-1-10*Registered No. *29*
(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 *Charles E. Edwards*

(If child is not yet named, make supplemental report as directed)

(1) BOY OR GIRL *Boy*

(4) Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? *yes*(7) DATE OF BIRTH *Feb. 10, 1922*To be answered only in event of Twin or Triplet *4*

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME *Mr. Edwards Sr.*(9) PRESENT POSTOFFICE OF FATHER *Rocky Mt. S.C.*(10) COLOR OR RACE *White*(11) AGE AT LAST BIRTHDAY *26*(12) BIRTHPLACE *Rocky Mt. S.C.*(13) OCCUPATION *Farmer*(14) Number of children born to mother, including present birth *1*

MOTHER

(14) NAME BEFORE MARRIAGE *Mrs. Edwards*(15) PRESENT POSTOFFICE OF MOTHER *Rocky Mt. S.C.*(16) COLOR OR RACE *White*(17) AGE AT LAST BIRTHDAY *26*(18) BIRTHPLACE *Rocky Mt. S.C.*(19) OCCUPATION *Housewife*(20) Number of children of this mother now living, including present birth *1*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was *alive* at *10 P.M.* on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(22) (Signature) *Mary Clark*(23) State whether Physician or Midwife *midwife*(24) Address of Physician or Midwife *Rocky Mt. S.C.*

Given name, middle, first, or supplemented last name

(25) Witness *H.C. Haillet*

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

(26) Date *Feb. 30, 1922*(27) Local Registrar *H.C. Haillet*

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 be reported as stillborn. No report is desired of children born at any time during the month of pregnancy.