

(1) PLACE OF BIRTH

County of Bamberg
 Township of Bridge
 or
 Inc. Town of Govan
 or
 City of _____

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

13711

Registration District No. 411Registered No. 57
(For use of Local Registrar)

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 Calla Ree Rice

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

(3) BOY OR GIRL girl

(4) Twin or Triplet?

(5) Number in order of birth
To be answered only in event of Twins or Triplets(6) Are Parents Married? yes(7) DATE OF BIRTH May 14 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Booker S Rice

(9) PRESENT POSTOFFICE OF FATHER

Govan S.C.

(10) COLOR OR RACE

col(11) AGE AT LAST BIRTHDAY 19
(Years)

(12) BIRTHPLACE

Govan S.C.

(13) OCCUPATION

farmer

(20) Number of children born to mother, including present birth

1

MOTHER

(14) NAME BEFORE MARRIAGE

Pearline Simmons

(15) PRESENT POSTOFFICE OF MOTHER

Govan S.C.

(16) COLOR OR RACE

col(17) AGE AT LAST BIRTHDAY 17
(Years)

(18) BIRTHPLACE

Govan S.C.

(19) OCCUPATION

farm laborer

(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 2:25 A.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Sylvia G. Bennett

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

midwifeGovan S.C.

Given name added from a supplemental report

(26) Witness

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

19 _____

Registrar

(27) Filed May 20 1922(28) J. E. Bennett

(29) 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.