

## (1) PLACE OF BIRTH -

County of WillmTownship of Carmichaelor  
Inc. Town of.....or  
City of.....

(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 J. H. W. Donald

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

(3) BOY OR GIRL Boy(4) Twin or Triplet? No

To be answered only in event of Twins or Triplets

(5) Number in order of birth 1(6) Are Parents Married? Yes(7) DATE OF BIRTH July 26, 1922

(Name of Month) (Day) (Year)

(8) FATHER'S FULL NAME J. H. W. Donald(9) PRESENT POSTOFFICE OF FATHER Harmer S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 22(12) BIRTHPLACE S.C.(13) OCCUPATION Callum mill work(14) Number of children born to mother, including present birth 1(15) MOTHER'S NAME BEFORE MARRIAGE Glemmie Cole(16) PRESENT POSTOFFICE OF MOTHER Harmer S.C.(17) COLOR OR RACE White(18) AGE AT LAST BIRTHDAY 22(19) BIRTHPLACE S.C.(20) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 1

(22) I hereby certify that I attended the birth of this child, who was... on the date above stated.

(23) (Signature) T. H. Carmichael M.D.(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Harmer S.C.

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed July 6, 1922(28) Local Registrar Alfred H. H. H.

(29) When there was no attending physician, then the father, householder, etc. should make this return. Be reported as stillborn. No report is desired of stillbirths 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

18376

Registration District No. 1601Registered No. 43  
(For use of Local Registrar)

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## FATHER.

(8) FULL NAME J. H. W. Donald(9) PRESENT POSTOFFICE OF FATHER Harmer S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 22(12) BIRTHPLACE S.C.(13) OCCUPATION Callum mill work(14) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Glemmie Cole(15) PRESENT POSTOFFICE OF MOTHER Harmer S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 22(18) BIRTHPLACE S.C.(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... on the date above stated.

(23) (Signature) T. H. Carmichael M.D.(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Harmer S.C.

Given name added from a supplementary report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

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