

## (1) PLACE OF BIRTH

County of LexingtonTownship of Saluda

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 Mildred Corene

File No.—For State Registrar Only

43577

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 3111Registered No. 44  
(For use of Local Registrar)

St.; ..... Ward)

If child is not yet named, make  
supplemental report as directed(3) BOY OR  
GIRL? girl(4) Twin  
or Triplet?  
To be answered only in event of Twins or Triplets(5) Number in  
order of birth(6) Are  
Parents  
Married? yes(7) DATE  
BIRTH Dec 17 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL  
NAME Charlie W. Wessinger(9) PRESENT  
POSTOFFICE  
OF FATHER Chapin(10) COLOR  
OR  
RACE white (11) AGE AT LAST  
BIRTHDAY 26  
(Years)(12) BIRTHPLACE  
S. C.(13) OCCUPATION  
Farmer(20) Number of children born to  
mother, including present birth 1

## MOTHER.

(14) NAME BEFORE  
MARRIAGE Eva Pearl Arnold(15) PRESENT  
POSTOFFICE  
OF MOTHER Chapin(16) COLOR  
OR  
RACE white (17) AGE AT LAST  
BIRTHDAY 26  
(Years)(18) BIRTHPLACE  
S. C.(19) OCCUPATION  
House wife(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 9:25 P.M.,  
on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)(23) (Signature) J. W. Wessinger

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife  
BallerineGiven name added from a supplement-  
tal report(26) Witness .....  
(Signature of Witness necessary only  
when question 23 is signed by mark)(27) Filed Jan 1 1923 (28) J. W. Wessinger  
Local Registrar\*When there was no attending physician or midwife, then the father, householders, 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.\*When there was no attending physician or midwife, then the father, householders, etc., should make this return.  
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before the fifth month of pregnancy.