

County of Kingstree, S.C.
 Town of Kingstree, S.C.
 City of Kingstree, S.C.
 (If born in a hospital or other institution, give name of same instead of street and number.)

Registered Marital No. 4437 Registered No. 4437
 (If child is not yet named, state appropriate name of child)

(2) Full Name of Child Baby Noel

(1) Sex Boy (2) Age 1 (3) Date of Birth Feb 8, 1922
 (4) Is the child a resident of the town or city? Yes

FATHER: (1) Full Name Reese Nixie (2) Present Residence of Father Kingstree, S.C.
 (3) Color or Race White (4) Age at last birthday 50
 (5) Birthplace Bennettville, S.C. (6) Occupation Farmer
 (7) Number of children born to father, including present one One

MOTHER: (1) Full Name Sallie Cattingh (2) Present Residence of Mother Kingstree, S.C.
 (3) Color or Race White (4) Age at last birthday 29
 (5) Birthplace Watersburg, S.C. (6) Occupation Domestic - mother
 (7) Number of children of this mother now living, including present one None

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 (28) I hereby certify that I attended the birth of this child, who was born on the date above stated.
 (29) (Signature) Ralph W. Deane, M.D.
 (30) State where Physician or Midwife Phys. (31) Address of Physician or Midwife Kingstree, S.C.

Given name added from a supplemental report
 (32) Witness (Signature of Witness necessary only when question 28 is signed by mark)
 (33) Signed Feb 8, 1922 (34) J. H. Whitson Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborn before the fifth month of pregnancy.

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WHEN PLACED IN THE DEPARTMENT OF HEALTH, THE REGISTRAR SHALL BE A PERSON WHOSE NAME IS ON THE LIST OF REGISTRARS IN THE DEPARTMENT OF HEALTH, NO. 1, THE COUNTY OF KINGSTREE, S.C., IN THE COUNTY OF KINGSTREE, S.C.