

(1) PLACE OF BIRTH

County of Marion
 Township of Wahlee
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

15903

Registration District No. 3207 Registered No. 13
 (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 Mable Elliott

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) Are Parents Married? yes (7) DATE OF BIRTH May 1, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Elliott
 (9) PRESENT POSTOFFICE OF FATHER Marion Co S.C.
 (10) COLOR OR RACE Cal (11) AGE AT LAST BIRTHDAY 45
 (Years)
 (12) BIRTHPLACE Marion Co S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Omego Elliott
 (15) PRESENT POSTOFFICE OF MOTHER Marion S.C.
 (16) COLOR OR RACE Cal (17) AGE AT LAST BIRTHDAY 36
 (Years)
 (18) BIRTHPLACE Marion Co S.C.
 (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 5 (21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 3 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Annie Edmanuel
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Marion S.C.

Given name added from a supplemental report

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

(27) Filed May 8, 1922 (28) J. L. Dill 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.