

(1) PLACE OF BIRTH

County of LaurensTownship of Wiala

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 Rula May Chappell

File No. — For State Registrar Only

43280

Registration District No. 2901Registered No. 153

(For use of Local Registrar)

(No. St.; Ward)

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

(3) <input checked="" type="checkbox"/> BOY OR GIRL? <u>girl</u>	(4) <input type="checkbox"/> Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec. 20 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Henry Chappell(9) PRESENT POSTOFFICE OF FATHER Laurens S.C.(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 35 (Years)(12) BIRTHPLACE Waterloo S.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth Two (2)

MOTHER.

(14) NAME BEFORE MARRIAGE Malinda Garrett(15) PRESENT POSTOFFICE OF MOTHER Laurens S.C.(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Sullivan Township(19) OCCUPATION Farming(21) Number of children of this mother now living, including present birth Seven

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 3 at Pin M., on the date above stated. (Born alive or ~~stillborn~~) (Hour) (or P. M.)(23) (Signature) Martha Bryson(24) State whether Physician or Midwife (Address of Physician or Midwife) Laurens S.C.

Given name added from a supplemental report

(26) Witness H. S. Mahon (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Jan 6 1923 (28) H. S. Mahon Local Registrar

19 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.

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filed before

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.