

(1) PLACE OF BIRTH

County of York
 Township of Kings Mt
 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

20576

Registration District No. 44.2.7 Registered No. 33
 (For use of Local Registrar)

(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

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 OF BIRTH June 30, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wm Reedy Warner
 (9) PRESENT POSTOFFICE OF FATHER Clover R 3
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 39
 (Years)

(12) BIRTHPLACE

N.C.

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

Seven (7)

MOTHER.

(14) NAME BEFORE MARRIAGE Para Theodocia Johnson
 (15) PRESENT POSTOFFICE OF MOTHER Clover R 3
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 31
 (Years)

(18) BIRTHPLACE

Easton Co NC

(19) OCCUPATION

House Wife

(21) Number of children of this mother now living, including present birth

Six

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 7:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Wm Reedy Warner

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Clover R 3

Given name added from a supplemental report

(26) Witness

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

(27) Filed June 30, 1922(28) C. E. H. H. Local Registrar

When there was no attending physician or midwife, when 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.