

(1) PLACE OF BIRTH

County of

Township of

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

31739

Registration District No.

Registered No.

(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

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Sep 2 - 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Frank Heardy

(9) PRESENT POSTOFFICE OF FATHER

Cope SC R 7 D

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

30

(Years)

(12) BIRTHPLACE

Barnwell Co

(13) OCCUPATION

Farming

MOTHER.

(14) NAME BEFORE MARRIAGE

Lizzie Salley

(15) PRESENT POSTOFFICE OF MOTHER

Cope SC R 7 D

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

30

(Years)

(18) BIRTHPLACE

Orangeburg Co

(19) OCCUPATION

Housewife

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

Six

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

Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... at 11:30 P.M. on the date above stated.

(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Cope SC R 7 D

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed

Oct 7 - 1922

(28) Local Registrar

*When there was no attending physician or midwife, then the father, household, 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.