

IF TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Chesler
Township of Rossville
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

18121

Registration District No. 11-7 Registered No. 25
(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 Prim (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH May 15, 1922
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Henry R. Outlaw
(9) PRESENT POSTOFFICE OF FATHER Great Falls
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37 (Years)
(12) BIRTHPLACE Sumter Co S.C.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 110

(14) NAME BEFORE MARRIAGE Erie Price
(15) PRESENT POSTOFFICE OF MOTHER Great Falls
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32 (Years)
(18) BIRTHPLACE Sumter Co S.C.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 19

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9:25 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. B. McNamee
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Great Falls

Given name added from a supplemental report

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

(27) Filed 11/10/22 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.