

(1) PLACE OF BIRTH

County of Dike
 Township of Windsor
 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

9708

Registration District No. 215 Registered No. 24
 (For use of Local Registrar)

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 Stephen Ray child is not yet named, make
 (Name of child) (Name of mother) (Name of father) (Name of mother) (Name of father)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Mar. 19, 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Butler Key
 (9) PRESENT POSTOFFICE OF FATHER Windsor
 (10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 30 (Year)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Lillie Davis
 (15) PRESENT POSTOFFICE OF MOTHER Windsor
 (16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 22 (Year)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mrs. Anna Nancy Windsor, S.C.
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(15) Registrar

(17) May 9, 1922 O. K. Weeks
 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.