

(1) PLACE OF BIRTH

County of Williamston,
Township of Kingstree,
or
Inc. Town of.....City of H.C. (No. West R. R. Ave. St.) Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthFile No.—For State Registrar Only
19433Registration District No. 43 Registered No. 26....
(For use of Local Registrar)(1) Full Name of Child Little Lema Vance If child is not yet named, make supplemental report as directed(2) SEX OR GENDER Girl (3) Twin or Triplet — (4) Number in order of birth — (5) Age Parents Married yes (6) DATE OF BIRTH June 22, 1923
(Name of Month) (Day) (Year)

FATHER.

(7) FULL NAME Ed McPherson Vance(8) PRESENT POSTOFFICE OF FATHER Kingstree, S.C.(9) COLOR OR RACE White (10) AGE AT LAST BIRTHDAY 29 (Years)(11) BIRTHPLACE Near Church, S.C.(12) OCCUPATION Mechanic(13) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Lema Rhina Haddock(15) PRESENT POSTOFFICE OF MOTHER Kingstree, S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)(18) BIRTHPLACE Near Rhens, S.C.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive at 7:45 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) Signature E. J. Kelley (23) State whether Physician or Midwife Physician (24) Address of Physician or Midwife Kingstree, S.C.

Given name added from a supplemental report

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

(26) Filed July 10, 1923 (27) J. M. McEachern 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.