

## (1) PLACE OF BIRTH

County of Aiken  
 Township of Rocky Grove  
 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  
17351

Registration District No. 209 Registered No. 30  
 (For use of Local Registrar)

City of ..... (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 Norris Bailey { 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 5 (6) Are Parents Married? yes (7) DATE OF BIRTH June 19, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Leni Bailey  
 (9) PRESENT POSTOFFICE OF FATHER Sally, S.C.  
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27  
 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 5

## MOTHER.

(14) NAME BEFORE MARRIAGE Minerva Hutto  
 (15) PRESENT POSTOFFICE OF MOTHER Sally, S.C.  
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 23  
 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION House wife  
 (21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 5 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Charity X. Lyles  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Perry, S.C.

Given name added from a supplemental report

(26) Witness Chas. X. Sallee  
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed June 20, 1922 (28) Chas. X. Sallee  
 Registrar 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.