

(1) PLACE OF BIRTH

County of Laurens
 Township of Diehl
 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

4785

Registration District No. 2901 Registered No. 6
 (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 Ethel Creeley If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes DATE OF BIRTH Jan 28 22
 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME	<u>Calvin Creeley</u>	(14) NAME BEFORE MARRIAGE	<u>Eliza Cleavel</u>
(9) PRESENT POSTOFFICE OF FATHER	<u>Gray Court</u>	(15) PRESENT POSTOFFICE OF MOTHER	<u>Gray Court</u>
(10) COLOR OR RACE	<u>Black</u>	(16) COLOR OR RACE	<u>Black</u>
(11) AGE AT LAST BIRTHDAY	<u>29</u>	(17) AGE AT LAST BIRTHDAY	<u>26</u>
(12) BIRTHPLACE	<u>Laurens Co</u>	(18) BIRTHPLACE	<u>Laurens Co</u>
(13) OCCUPATION	<u>Farming</u>	(19) OCCUPATION	<u>Farming</u>
(20) Number of children born to mother, including present birth	<u>5</u>	(21) Number of children of this mother now living, including present birth	<u>5</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 11 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rebecca Williams

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Laurens Co

Given name added from a supplemental report

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

(27) Filed Mar 8 22 (28) W. C. Mahon 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.