

## (1) PLACE OF BIRTH

County of Spartanburg  
 Township of Beech Springs  
 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

20156

Registration District No. 4000B Registered No. 32  
 (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 Barnie Deborah Warren (If child is not yet named, make supplemental report as directed)

(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 May 4 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME E. J. Warren  
 (9) PRESENT POSTOFFICE OF FATHER Spartanburg  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40  
 (Years)  
 (12) BIRTHPLACE S. C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth Three

## MOTHER.

(14) NAME BEFORE MARRIAGE Catharine Ellis  
 (15) PRESENT POSTOFFICE OF MOTHER Spartanburg  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 39  
 (Years)  
 (18) BIRTHPLACE S. C.  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth Three

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11:54 A.M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) D. F. Hightston M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Spartanburg

Given name added from a supplement-  
 tal report

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

(27) Filed June 1 1922 (28) S. B. Moore  
 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.