

## (1) PLACE OF BIRTH

County of Pickens  
 Township of Central  
 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

2264

Registration District No. 37.00 Registered No. 14-  
 (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 Pathanille Hunter If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 20, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Earle Hunter  
 (9) PRESENT POSTOFFICE OF FATHER Central S.C.  
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 30  
 (Years)  
 (12) BIRTHPLACE Wade Co, S.C.  
 (13) OCCUPATION Merchant  
 (20) Number of children born to mother, including present birth 13

## MOTHER.

(14) NAME BEFORE MARRIAGE Beitha Nora Cooke  
 (15) PRESENT POSTOFFICE OF MOTHER Central S.C.  
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 23  
 (Years)  
 (18) BIRTHPLACE Jackson Co, N.C.  
 (19) OCCUPATION Housekeeper  
 (21) Number of children of this mother now living, including present birth 13

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) J. D. Seardon(24) State whether Physician or Midwife Phys.(25) Address of Physician or Midwife Central S.C.

Given name added from a supplemental report

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

(27) Filed Jan 23 1922 (28) J. D. Seardon 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.

MAY NOT BE REPRODUCED FOR BINDING.

WHITE PLAINS, WITH EXPANDING INC.—THIS IS A PERMANENT RECORD.  
 N. B.—In case of TWINS, SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McGraw-Hill, Columbia, N. Y.