

Form No. 1

## (1) PLACE OF BIRTH

County of Anderson  
 Township of Williamson  
 or  
 Inc. Town of Pelzer S.C.  
 or  
 City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only

32987

Registration District No. 3DRegistered No. 132  
(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

John R. King Jr. (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 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 28 22  
 (Name of Month) (Day) (Year)

FATHER MOTHER  
 (8) FULL NAME John R. King (14) NAME BEFORE MARRIAGE Annie Simpson  
 (9) PRESENT POSTOFFICE OF FATHER Pelzer S.C. (15) PRESENT POSTOFFICE OF MOTHER Pelzer S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 23 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 19  
 (12) BIRTHPLACE S.C. (18) BIRTHPLACE S.C.  
 (13) OCCUPATION mill work (19) OCCUPATION Domestic  
 (20) Number of children born to mother, including present birth one (21) Number of children of this mother now living, including present birth one

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 6:30 a.m. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. T. Moten(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Pelzer 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 Nov 6 1922 (28) H. T. Moten 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.