

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

23122

(1) PLACE OF BIRTH

County of MarionTownship of Powell

or

Inc. Town of

or

City of

Registration District No. 3206Registered No. 20
(For use of Local Registrar)

(2) Full Name of Child

ella Mae Grant

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH May 27, 22
(Name of Month (Day) (Year)(8) FULL NAME Lawrence Grant(9) PRESENT POSTOFFICE OF FATHER Gresham D.C.(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 22
(Years)(12) BIRTHPLACE Marion Co. D.C.(13) OCCUPATION Farm Hand(20) Number of children born to mother, including present birth 2(14) NAME BEFORE MARRIAGE Viola Kinson(15) PRESENT POSTOFFICE OF MOTHER Gresham D.C.(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 20
(Years)(18) BIRTHPLACE Marion Co. D.C.(19) OCCUPATION House-wife(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... Alive... at 1 P. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Lizzie Hough(24) State whether J. M. or Midwife Midwife(25) Address of Physician or Midwife Gresham D.C.

Given name added from a supplemental report

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

(27) Filed July 18, 1922(28) G. M. Boatwright
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.

WRITE PLAINLY WITH INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.