

(1) PLACE OF BIRTH

County of Chester

Township of

or
Inc. Town ofCity of Chester

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

33681

Registration District No. 11A Registered No. 104
(For use of Local Registrar)City of Chester (No. 179 E Race St.; Ward)(2) Full Name of Child. Thomas Watter Bickett 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) Age 1 (7) DATE OF BIRTH Sept. 28, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert M. Elwan Bickett (9) NAME BEFORE MARRIAGE Eva Bell Potts(9) PRESENT POSTOFFICE OF FATHER Chester, S.C. (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 39 (12) PRESENT POSTOFFICE OF MOTHER Chester, S.C.(13) COLOR OR RACE White (14) AGE AT LAST BIRTHDAY 38 (15) BIRTHPLACE Union Co. S.C. (16) COLOR OR RACE White(17) BIRTHPLACE Laurens Co. S.C. (18) OCCUPATION Housewife (19) OCCUPATION Housewife(20) Number of children born to mother, including present birth 5 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 11:33 a.m. on the date above stated. (Born live or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. M. McCall (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Chester, S.C.

Given name added from a supplemental report

....., 191.....

Registrar

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

(27) Filed Nov. 1, 1922 (28) John D. McCall 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.

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MARGIN RESERVED FOR FINDING

FORM NO. 2

WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.

McCall of Columbia