

MARGIN RESERVED FOR INDEXING.  
 WHITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
 N.B.—In case of TWINS OR TRIPLETS use SEPARATE BLANKS FOR EACH CHILD, and mark the  
 FIRST-BORN, NO. 1, THE OTHER, NO. 2, etc., in question 2.

(1) PLACE OF BIRTH

County of Cherokee  
 Township of Smith  
 or  
 Inc. Town of Gaffney  
 or  
 City of Gaffney

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

(2) Full Name of Child

Charles Edward Smith

File No.—For State Registrar Only  
661

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

Registration District No. 100 Registered No. 7  
(For use of Local Registrar)

(No. Philip St.        Ward       )

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

(3) BOY ☒ GIRL ☐ (4) Twin or Triplet? ☐ (5) Number in order of birth        (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 19 1922  
 To be answered only in event of Twins or Triplets (Name) (Month) (Day) (Year)

FATHER.

(8) FULL NAME Dr. Oscar Sanderson  
 (9) PRESENT POSTOFFICE OF FATHER Gaffney S.C.  
 (10) COLOR OF RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)  
 (12) BIRTHPLACE Huntsville, N.C.  
 (13) OCCUPATION Machinist  
 (20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Esther Ambrosine Allen  
 (15) PRESENT POSTOFFICE OF MOTHER Gaffney S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)  
 (18) BIRTHPLACE Cherokee Co. S.C.  
 (19) OCCUPATION House wife  
 (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 alive at 130 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) [Signature]  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Gaffney 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 2/10 1922 (28) W. F. Smith 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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