

## (1) PLACE OF BIRTH

County of CherokeeTownship of Cherokee

or

Inc. Town of Blacksburg

or

City of ..... (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

File No.—For State Registrar Only

17999

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 1000A Registered No. 56  
(For use of Local Registrar)

(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 June 20, 1922

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

William Baxter Horne

(9) PRESENT POSTOFFICE OF FATHER

Blacksburg, S. C.

(10) COLOR OR RACE

White(11) AGE AT LAST BIRTHDAY 42  
(Years)

(12) BIRTHPLACE

York Co., S. C.

(13) OCCUPATION

Carpenter

(20) Number of children born to mother, including present birth

(Ten (10))

## MOTHER.

(14) NAME BEFORE MARRIAGE

Ella Martin

(15) PRESENT POSTOFFICE OF MOTHER

Blacksburg, S. C.

(16) COLOR OR RACE

White(17) AGE AT LAST BIRTHDAY 42  
(Years)

(18) BIRTHPLACE

York Co., S. C.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

(Seven (7))

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive ..... at 3:30 A.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. F. Lee

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Blacksburg, 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

June 20, 1922(28) C. F. Lee

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.