

NOTE: PRINTED, WITH UNFADING 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.

## (1) PLACE OF BIRTH

County of .....

Township of .....

or

Inc. Town of .....

or

City of Spartanburg.....

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

## (2) Full Name of Child

(3) BOY OR GIRL? <u>boy</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Jan 7 1922</u> (Name of Month) (Day) (Year)
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## FATHER.

(8) FULL NAME Joe C. Hughton(9) PRESENT POSTOFFICE OF FATHER Spartanburg S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30  
(Year)(12) BIRTHPLACE Spartanburg S.C.(13) OCCUPATION Lawyer(20) Number of children born to mother, including present birth 1

File No.—For State Registrar Only

20078

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 40-A Registered No. 2570  
(For use of Local Registrar)(No. 226 S. Liberty.....St.; .....Ward)

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Martha Whitefield(15) PRESENT POSTOFFICE OF MOTHER Spartanburg S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23  
(Year)(18) BIRTHPLACE Durham N.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was .....at.....M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. H. Hughton

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed in

1-1-22

(28)

Jas. Cooper

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.