

## (1) PLACE OF BIRTH

County of Richland  
 Township of Blythewood  
 or  
 Inc. Town of \_\_\_\_\_  
 or  
 City of \_\_\_\_\_

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

2381

Registration District No. 3800Registered No. 3

(For use of Local Registrar)

Only

(No. \_\_\_\_\_) (For use of Local Registrar)  
 If birth occurs in a hospital or other institution, give name of same instead of street and number. (Ward) \_\_\_\_\_

(2) Full Name of Child Emma Elizabeth Trapp 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 Jan. 8, 22  
 (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL  
 NAME Ben Tillman Trapp

(14) NAME BEFORE  
 MARRIAGE Bessie May Smith

(9) PRESENT  
 RESIDENCE  
 OF FATHER Blythewood SC

(15) PRESENT  
 POSTOFFICE  
 OF MOTHER Blythewood SC

(10) COLOR  
 OR  
 RACE White (11) AGE AT LAST  
 BIRTHDAY 24  
 (Years)

(16) COLOR  
 OR  
 RACE White (17) AGE AT LAST  
 BIRTHDAY 20  
 (Years)

(12) BIRTHPLACE  
near Blythewood

(18) BIRTHPLACE  
Blythewood SC

(13) OCCUPATION  
Farmer

(19) OCCUPATION  
Domestic

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

(21) Number of children of this mother  
 now living, including present birth none

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 8:20 A.  
 on the date above stated. (Born alive or stillborn) (Hyp. M. or P. M.)

(23) (Signature) Ellen Bell Trapp

(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
1 Blythewood

Give name added from a supplement-  
 al report

(26) Witness

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

Registrar

(27) Filed Jan 14, 1922(28) W. A. McLean  
 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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