

(1) PLACE OF BIRTH

County of Pickens

Township of

or Inc. Town of

City of Basley

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

(2) Full Name of Child George Walter Bolding

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 24 22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME George Walter Bolding
(9) PRESENT POSTOFFICE OF FATHER Basley
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22
(Year)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Textile work

MOTHER.
(14) NAME BEFORE MARRIAGE Henrietta Nally
(15) PRESENT POSTOFFICE OF MOTHER Basley
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 16
(Year)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 1 (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 Alive at 5 P. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. B. Bolding
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Basley

Given name added from a supplemental report
(26) Witness
(Signature of Witness necessary only when question 23 is signed) E. H. Wyatt
(27) Filed Oct. 2 1922 (28) E. H. Wyatt 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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