

FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 8

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Anderson, S.C.
Township of 812 Brook St.

STATE OF SOUTH CAROLINA,
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
2968

Inc. Town of or City of (No. St.; Ward)
Registration District No. 3A Registered No. 64
(For use of Local Registrar)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Eugenia Lee Riley
X By Court Order 3-13-22 Mary Frances Riley
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 BIRTH Feb 22 22
To be answered only in event of twins or triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Ward R. Riley
(9) PRESENT POSTOFFICE OF FATHER Anderson, S.C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 37 (Years)
(12) BIRTHPLACE Ala.
(13) OCCUPATION Clerk
(20) Number of children born to mother, including present birth { 6 }

MOTHER.
(14) NAME BEFORE MARRIAGE Maudie Eugenia Sesson
(15) PRESENT POSTOFFICE OF MOTHER Anderson, S.C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 39 (Years)
(18) BIRTHPLACE Ala.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth { 6 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 10:30 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) H.M. Daniel M.D.
(24) State whether Physician or Midwife | (25) Address of Physician or Midwife
Per. A. 13.

Given name added from a supplemental report
Court Order #4916
Feb 28 1922
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Mar 10 1922 (28) (29) 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.