

## (1) PLACE OF BIRTH:

County of Champaign  
Township of St. Louis  
or  
Inc. Town of .....  
or  
City of .....

**CERTIFICATE OF BIRTH**  
**STATE OF SOUTH CAROLINA**  
**Bureau of Vital Statistics**  
**State Board of Health**

Registration District No. 12

File No.—For State Registrar Only

0015

Registered No. .... 2 .....  
(For use of Local Registrar)

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 Walter Zischelbeck { If child is not yet named, make

(2) Full Name of Child Walter Zischelbeck { If child is not yet named, make

(3) BOY OR GIRL? girl (4) Twin or Triplet? 9 (5) Number in order of birth 9 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 9, 1922  
(Name of Month) (Day) (Year)

(8) FULL NAME	PATHER.	(14) NAME BEFORE MARRIAGE	MOTHER.
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(1) PRESENT POSTOFFICE OF FATHER Bellevue (15) PRESENT POSTOFFICE OF MOTHER Bellevue

(10) COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *41* (18) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *29*

(12) BIRTHPLACE	SL	(18) BIRTHPLACE	SL
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(12) OCCUPATION Gen. Inv.	(13) OCCUPATION Gen. Inv.
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(20) Number of children born to mother, including present birth 9 (21) Number of children of this mother now living, including present birth 9

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(23) I hereby certify that I attended the birth of this child, who was ..... at 11 ..... PM,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) Signature [Signature]  
(24) State whether Physician or Midwife Physician (25) Address of Physit Or Midwife

Given name added from a supplemental report

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

1/2, 1/3, 1/4, 1/5, 1/6, 1/7, 1/8, 1/9, 1/10, 1/11, 1/12, 1/13, 1/14, 1/15, 1/16, 1/17, 1/18, 1/19, 1/20, 1/21, 1/22, 1/23, 1/24, 1/25, 1/26, 1/27, 1/28, 1/29, 1/30, 1/31, 1/32, 1/33, 1/34, 1/35, 1/36, 1/37, 1/38, 1/39, 1/40, 1/41, 1/42, 1/43, 1/44, 1/45, 1/46, 1/47, 1/48, 1/49, 1/50, 1/51, 1/52, 1/53, 1/54, 1/55, 1/56, 1/57, 1/58, 1/59, 1/60, 1/61, 1/62, 1/63, 1/64, 1/65, 1/66, 1/67, 1/68, 1/69, 1/70, 1/71, 1/72, 1/73, 1/74, 1/75, 1/76, 1/77, 1/78, 1/79, 1/80, 1/81, 1/82, 1/83, 1/84, 1/85, 1/86, 1/87, 1/88, 1/89, 1/90, 1/91, 1/92, 1/93, 1/94, 1/95, 1/96, 1/97, 1/98, 1/99, 1/100, 1/101, 1/102, 1/103, 1/104, 1/105, 1/106, 1/107, 1/108, 1/109, 1/110, 1/111, 1/112, 1/113, 1/114, 1/115, 1/116, 1/117, 1/118, 1/119, 1/120, 1/121, 1/122, 1/123, 1/124, 1/125, 1/126, 1/127, 1/128, 1/129, 1/130, 1/131, 1/132, 1/133, 1/134, 1/135, 1/136, 1/137, 1/138, 1/139, 1/140, 1/141, 1/142, 1/143, 1/144, 1/145, 1/146, 1/147, 1/148, 1/149, 1/150, 1/151, 1/152, 1/153, 1/154, 1/155, 1/156, 1/157, 1/158, 1/159, 1/160, 1/161, 1/162, 1/163, 1/164, 1/165, 1/166, 1/167, 1/168, 1/169, 1/170, 1/171, 1/172, 1/173, 1/174, 1/175, 1/176, 1/177, 1/178, 1/179, 1/180, 1/181, 1/182, 1/183, 1/184, 1/185, 1/186, 1/187, 1/188, 1/189, 1/190, 1/191, 1/192, 1/193, 1/194, 1/195, 1/196, 1/197, 1/198, 1/199, 1/200, 1/201, 1/202, 1/203, 1/204, 1/205, 1/206, 1/207, 1/208, 1/209, 1/210, 1/211, 1/212, 1/213, 1/214, 1/215, 1/216, 1/217, 1/218, 1/219, 1/220, 1/221, 1/222, 1/223, 1/224, 1/225, 1/226, 1/227, 1/228, 1/229, 1/230, 1/231, 1/232, 1/233, 1/234, 1/235, 1/236, 1/237, 1/238, 1/239, 1/240, 1/241, 1/242, 1/243, 1/244, 1/245, 1/246, 1/247, 1/248, 1/249, 1/250, 1/251, 1/252, 1/253, 1/254, 1/255, 1/256, 1/257, 1/258, 1/259, 1/260, 1/261, 1/262, 1/263, 1/264, 1/265, 1/266, 1/267, 1/268, 1/269, 1/270, 1/271, 1/272, 1/273, 1/274, 1/275, 1/276, 1/277, 1/278, 1/279, 1/280, 1/281, 1/282, 1/283, 1/284, 1/285, 1/286, 1/287, 1/288, 1/289, 1/290, 1/291, 1/292, 1/293, 1/294, 1/295, 1/296, 1/297, 1/298, 1/299, 1/300, 1/301, 1/302, 1/303, 1/304, 1/305, 1/306, 1/307, 1/308, 1/309, 1/310, 1/311, 1/312, 1/313, 1/314, 1/315, 1/316, 1/317, 1/318, 1/319, 1/320, 1/321, 1/322, 1/323, 1/324, 1/325, 1/326, 1/327, 1/328, 1/329, 1/330, 1/331, 1/332, 1/333, 1/334, 1/335, 1/336, 1/337, 1/338, 1/339, 1/340, 1/341, 1/342, 1/343, 1/344, 1/345, 1/346, 1/347, 1/348, 1/349, 1/350, 1/351, 1/352, 1/353, 1/354, 1/355, 1/356, 1/357, 1/358, 1/359, 1/360, 1/361, 1/362, 1/363, 1/364, 1/365, 1/366, 1/367, 1/368, 1/369, 1/370, 1/371, 1/372, 1/373, 1/374, 1/375, 1/376, 1/377, 1/378, 1/379, 1/380, 1/381, 1/382, 1/383, 1/384, 1/385, 1/386, 1/387, 1/388, 1/389, 1/390, 1/391, 1/392, 1/393, 1/394, 1/395, 1/396, 1/397, 1/398, 1/399, 1/400, 1/401, 1/402, 1/403, 1/404, 1/405, 1/406, 1/407, 1/408, 1/409, 1/410, 1/411, 1/412, 1/413, 1/414, 1/415, 1/416, 1/417, 1/418, 1/419, 1/420, 1/421, 1/422, 1/423, 1/424, 1/425, 1/426, 1/427, 1/428, 1/429, 1/430, 1/431, 1/432, 1/433, 1/434, 1/435, 1/436, 1/437, 1/438, 1/439, 1/440, 1/441, 1/442, 1/443, 1/444, 1/445, 1/446, 1/447, 1/448, 1/449, 1/450, 1/451, 1/452, 1/453, 1/454, 1/455, 1/456, 1/457, 1/458, 1/459, 1/460, 1/461, 1/462, 1/463, 1/464, 1/465, 1/466, 1/467, 1/468, 1/469, 1/470, 1/471, 1/472, 1/473, 1/474, 1/475, 1/476, 1/477, 1/478, 1/479, 1/480, 1/481, 1/482, 1/483, 1/484, 1/485, 1/486, 1/487, 1/488, 1/489, 1/490, 1/491, 1/492, 1/493, 1/494, 1/495, 1/496, 1/497, 1/498, 1/499, 1/500, 1/501, 1/502, 1/503, 1/504, 1/505, 1/506, 1/507, 1/508, 1/509, 1/510, 1/511, 1/512, 1/513, 1/514, 1/515, 1/516, 1/517, 1/518, 1/519, 1/520, 1/521, 1/522, 1/523, 1/524, 1/525, 1/526, 1/527, 1/528, 1/529, 1/530, 1/531, 1/532, 1/533, 1/534, 1/535, 1/536, 1/537, 1/538, 1/539, 1/540, 1/541, 1/542, 1/543, 1/544, 1/545, 1/546, 1/547, 1/548, 1/549, 1/550, 1/551, 1/552, 1/553, 1/554, 1/555, 1/556, 1/557, 1/558, 1/559, 1/560, 1/561, 1/562, 1/563, 1/564, 1/565, 1/566, 1/567, 1/568, 1/569, 1/570, 1/571, 1/572, 1/573, 1/574, 1/575, 1/576, 1/577, 1/578, 1/579, 1/580, 1/581, 1/582, 1/583, 1/584, 1/585, 1/586, 1/587, 1/588, 1/589, 1/590, 1/591, 1/592, 1/593, 1/594, 1/595, 1/596, 1/597, 1/598, 1/599, 1/600, 1/601,

\*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.