

BIRTH

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(1) PLACE OF BIRTH

County of Anderson

Township of

or

Inc. Town of

or

City of Anderson

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

(2) Full Name of Child Henry Pierce

File No.—For State Registrar Only

20832

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 3ARegistered No. 263

(For use of Local Registrar)

(No. 11 H. Anderson Ward)

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

(3) BOY OR GIRL ✓

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH

July 16, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Martin Henry Pierce

(9) PRESENT POSTOFFICE OF FATHER

Anderson & C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 39
(Years)

(12) BIRTHPLACE

Franklin Co. Ga.

(13) OCCUPATION

Cotton mill Oper.

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

10

MOTHER.

(14) NAME BEFORE MARRIAGE

Artie Lamar

(15) PRESENT POSTOFFICE OF MOTHER

Anderson S.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 37
(Years)

(18) BIRTHPLACE

Greenville Co. S.C.

(19) OCCUPATION

Domestic

(21) Number of children of this mother now living, including present birth

8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 3 A.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Wade Thompson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

M.D. Anderson S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed 8-10-221922

(28)

F. B. Crayton

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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