

(1) PLACE OF BIRTH

County of Lancaster  
Township of Mill Creek  
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  
**43184**

Registration District No. 2804 Registered No. 221  
(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 Willie Henrietta Saffu If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? Y (5) Number in order of birth 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov 13 1922  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Jessie Saffu  
(9) PRESENT POSTOFFICE OF FATHER Lancaster S.C.  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27 (Years)  
(12) BIRTHPLACE Lancaster S.C.  
(13) OCCUPATION laborer  
(20) Number of children born to mother, including present birth 1

MOTHER.  
(14) NAME BEFORE MARRIAGE Almetta Snow  
(15) PRESENT POSTOFFICE OF MOTHER Lancaster S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25 (Years)  
(18) BIRTHPLACE Lancaster S.C.  
(19) OCCUPATION domestic  
(21) Number of children of this mother new 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 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Mill Creek Lancaster S.C.

Given name added from a supplemental report  
.....  
.....  
..... 19 ..  
Registrar

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed 12-4 19 22 (28) J. Thomasson 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.

Registrar Local Registrar.  
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FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.  
MCGAW OF COLUMBIA, COLUMBIA, S. C.