

(1) PLACE OF BIRTH

County of York
 Township of _____
 or
 Inc. Town of H. mill
 or
 City of _____

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

9548

Registration District No. 406 Registered No. 12
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of street and number.)
 (No. _____ St. _____ Ward _____)

(2) Full Name of Child

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

(3) BOY OR GIRL Boy (4) Twin or Triplet _____ (5) Number in order of birth _____ (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar. 2 1922
 (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Brooks Caldwell

(9) PRESENT POSTOFFICE OF FATHER H. mill S.C.

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 45
 (Year)

(12) BIRTHPLACE N.C.

(13) OCCUPATION R.R. Section Hand

(20) Number of children born to mother, including present birth 7

MOTHER

(14) NAME BEFORE MARRIAGE Annie Lee Green

(15) PRESENT POSTOFFICE OF MOTHER H. Mill S.C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 30
 (Year)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Rosa Harris

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife H. mill S.C.

Given name added from a supplemental report

(26) Witness A. L. Parker
 (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 3/3-1922 (28) A. L. Parker
 Registrar 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.