

(1) PLACE OF BIRTH
 County of Orangeburg **CERTIFICATE OF BIRTH**
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health
 Township of Helbron 22 049277
 or
 Inc. Town of Registration District No. 3608 Registered No. 81
 or
 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 Herman { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>boy</u>	(4) Twin or Triplet?	(5) Number in order of birth <small>To be answered only in event of Twin or Triplets</small>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Nov 27 22</u> <small>(Name of Month) (Day) (Year)</small>
FATHER			MOTHER	
(8) FULL NAME <u>Jacob F. Gleaton</u>			(14) NAME BEFORE MARRIAGE <u>Theo Lee Williams</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Neeses, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Neeses, S.C.</u>	
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>43</u> <small>(Years)</small>	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>33</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>S.C.</u>			(18) BIRTHPLACE <u>S.C.</u>	
(13) OCCUPATION <u>farmer</u>			(19) OCCUPATION <u>none</u>	
(20) Number of children born to mother, including present birth { <u>7</u> }			(21) Number of children of this mother now living, including present birth { <u>7</u> }	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11:45 p.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) G. L. Williams

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Neeses, S.C.

Given name added from a supplemental report
 191....
 Registrar

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

(27) Filed Dec 11 22 (28) H. L. Williams 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.