

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Rock
 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

2533

Registration District No. 4006Registered No. 3
(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 Cathleen Wells (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH 1-24-1922
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Richard Wells
 (9) PRESENT POSTOFFICE OF FATHER Trough S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Millwork
 (20) Number of children born to mother, including present birth 7

MOTHER.
 (14) NAME BEFORE MARRIAGE Alice Horn
 (15) PRESENT POSTOFFICE OF MOTHER Trough S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Cathleen at 39 M.
 on the date above stated. (Born alive or stillborn) (Month A. M. or P. M.)

(23) (Signature) M. D. Knepper
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife
M. D. Knepper, 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 2-1-1922 (28) M. W. Brown 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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MAILED 10 FEB 2 1922
 N. B.—In case of a stillbirth, use a SEPARATE BLANK FOR EACH CHILD, and mark the
 "Stillborn" on the child's certificate. This is a PERMANENT RECORD.
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