

WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECEIVED BY COLUMBIA, COLUMBIA, S. C.

RECEIVED BY

(1) PLACE OF BIRTH

County of Myrtle Beach
Township of Santuck
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

6009

Registration District No. 4-206 Registered No. 2
(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 Arthur Woodrow Peak If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 31, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Charlie Peak
(9) PRESENT POSTOFFICE OF FATHER Santuck, SC.
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 24
(Year)
(12) BIRTHPLACE Santuck SC.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 1

MOTHER.
(14) NAME BEFORE MARRIAGE Lila Wether
(15) PRESENT POSTOFFICE OF MOTHER Santuck, SC.
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 23
(Year)
(18) BIRTHPLACE SC.
(19) OCCUPATION Farming
(21) Number of children of this mother now 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 Born alive at 4:00 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Linda Jeter (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Santuck, SC.

Given name added from a supplemental report

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

(27) Filed 3/10 19 22 (28) L. B. Jeter Jr. 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 (29) 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.