

(1) PLACE OF BIRTH

County of GeorgetownTownship of 77or
Inc. Town of Anders SCor
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

18684

Registration District No. 7103Registered No. 72
(For use of Local Registrar)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 Not Named If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Male</u>	(4) Twin or Triplet? <u>No</u> To be answered only in case of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 14 1922</u> (Name of Month) (Day) (Year)
--------------------------------	---	--	--	---

FATHER.

(8) FULL NAME James Wesley Wheeler

(9) PRESENT POSTOFFICE OF FATHER Anders SC

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)

(12) BIRTHPLACE Georgetown Co S.C.

(13) OCCUPATION R.R.

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Thelma Hart

(15) PRESENT POSTOFFICE OF MOTHER Anders SC

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Richland Co S.C.

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 4

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive (or stillborn) at 3 P. M., on the date above stated. (From A. M. or P. M.)(23) (Signature) J. W. Wheeler

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Anders SC

Given name added from a supplemental report

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

(27) Filed 19 (28) 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.