

(1) PLACE OF BIRTH

County of LaurensTownship of Sullivanor
Inc. Town ofor
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 29

File No.—For State Registrar Only

7608Registered No. 15
(For use of Local Registrar)

(2) Full Name of Child

Baellinger Thor Grayham

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet

X

(5) Number in order of birth

X

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH

Feb 191922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Walter Perry Grayham

(9) PRESENT POSTOFFICE OF FATHER

Marine Shoals S.C.R.2

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

29

(Years)

(12) BIRTHPLACE

Laurens Co. S.C.

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Wife for Baellinger

(15) PRESENT POSTOFFICE OF MOTHER

Marine Shoals S.C.R.2

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

25

(Years)

(18) BIRTHPLACE

Grille Co. S.C.

(19) OCCUPATION

Housewife

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

1 2

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

1 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was
on the date above stated.Alive at 8:30 A.M.
(Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Marine Park S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed Mar 16 1923(28) Wm. Sullivan

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.

FIRST-BORN, No. 1 THE OTHER, No. 2, etc., in question 1

Bureau of Statistics, Columbia, S.C.