

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD, and mark the 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.

REC'D

(1) PLACE OF BIRTH

County of Harry
Township of Gallinets
or
Inc. Town of.....
or
City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health
Registration District No. 2505

File No.—For State Registrar Only

34941

Registered No. 95
(For use of Local Registrar)

(2) Full Name of Child Bernie Granger Bullard
(If birth occurs in Home or other institution, give name of same instead of street and number.)
St. Ward
Not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>1</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Oct 25, 1922</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Joseph Thannon Bullock</u>			(14) NAME BEFORE MARRIAGE <u>Alice Granger</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Gallinets, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Gallinets, S.C.</u>	
(10) COLOR OR RACE <u>White</u>			(16) COLOR OR RACE <u>White</u>	
(11) AGE AT LAST BIRTHDAY <u>30</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>29</u> (Years)	
(12) BIRTHPLACE <u>Robeson County, N.C.</u>			(18) BIRTHPLACE <u>Harry County, S.C.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother, including present birth <u>12</u>			(21) Number of children of this mother now living, including present birth <u>12</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) W. B. Woodward

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name W. B. Woodward from a supplemental report

12/2/42 19 42
Registrar

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

(27) Oct 18, 1922 19 22 Rep. M. Huggins
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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