

Form No. 1

(1) PLACE OF BIRTH

County of O. DanielTownship of Waynes

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

43023

Registration District No. 3206Registered No. 119

(For use of Local Registrar)

(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

Cole Blean Wilson

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 15 22</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Andrew Wilson(9) PRESENT POSTOFFICE OF FATHER Walhalla(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 34 (Years)(12) BIRTHPLACE Walhalla(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Eva Jones(15) PRESENT POSTOFFICE OF MOTHER Walhalla(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE Anderson(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive (Born alive or stillborn) at 11:00 M., on the date above stated. (Hour A. M. or P. M.)(23) (Signature) C. L. Wilson(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Walhalla

Given name added from a supplemental report

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

(27) Filed Dec 19 22 (28) St. Hill 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.