

## (1) PLACE OF BIRTH

County of Williamburg  
 Township of High  
 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

32595

Registration District No. 4301Registered No. 114  
(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 Oliver Murrell

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 24 1922  
 To be answered only in event of Twins or Triplets (Name) (Month) (Day) (Year)

## FATHER.

(8) FULL NAME Franklin Murrell  
 (9) PRESENT POSTOFFICE OF FATHER Harshville S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 24 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE Janis Keels  
 (15) PRESENT POSTOFFICE OF MOTHER Harshville S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 1 (21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Alive at 5 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Samma White  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Harshville S.C.

Given name added from a supplemental report

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

(27) Filed Sept 28 1922 (28) J. A. Blackwell 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.