

## (1) PLACE OF BIRTH

County of BarnwellTownship of WillistonInc. Town of \_\_\_\_\_  
or \_\_\_\_\_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

File No.—For State Registrar Only

27229

Registration District No. 013 Registered No. 43  
(For use of Local Registrar)

Ward) \_\_\_\_\_

(2) Full Name of Child Martelle Quattlebaum If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married yes(7) DATE OF BIRTH Aug. 31 1922  
None of (Month) (Day) (Year)

## FATHER.

(8) FULL NAME E. Dess Quattlebaum(9) PRESENT POSTOFFICE OF FATHER Williston S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Years)(12) BIRTHPLACE Lexington Co.(13) OCCUPATION Farmer(14) Number of children born to father, including present birth Five

## MOTHER.

(14) NAME BEFORE MARRIAGE Kathleen Elliott(15) PRESENT POSTOFFICE OF MOTHER Williston S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24 (Years)(18) BIRTHPLACE Coffee Co. Georgia(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth Five

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was alive at 12 22 A.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. Bone

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

PhysicianWilliston, 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 10 22

(28)

W. H. Johnson  
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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