

(1) PLACE OF BIRTH

County of Big LandTownship of W. Ter

In Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

8978

Registration District No. 3801Registered No. 3
(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 Nathaniel Hanes If child is not yet named, make supplemental report as directed(3) BOY OR GIRL boy (4) Twin or Triplet? No (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 12 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Hal Hanes(9) PRESENT POSTOFFICE OF FATHER Eastover S.C.(10) COLOR OR RACE Cal (11) AGE AT LAST BIRTHDAY 25
(Years)(12) BIRTHPLACE Big Land Co S.C.(13) OCCUPATION Farm Hand(20) Number of children born to mother, including present birth 1 2

MOTHER

(14) NAME BEFORE MARRIAGE Jennie Byrum(15) PRESENT POSTOFFICE OF MOTHER Eastover S.C.(16) COLOR OR RACE Cal (17) AGE AT LAST BIRTHDAY 23
(Years)(18) BIRTHPLACE Big Land Co S.C.(19) OCCUPATION House Wife(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 11 P.M.
on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Lizzie Byrum(24) State whether Physician or Midwife (25) Address of Physician or Midwife Eastover 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 Jan 20 1922 (28) A. B. Campbell
Registrar 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.

*When reporting with parents who have had previous children, give date of birth, and state, in question 3, whether the child is a first-born, second-born, etc., in question 4.