

(1) PLACE OF BIRTH

County of Robeson

Township of

or
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthFile No.—For State Registrar Only
31420Registration District No. 3405 Registered No. 24
(For use of Local Registrar)(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(No. St. Ward)2) Full Name of Child Ellen Lyles Wicks

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

1) BOY OR GIRL <u>GIRL</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>Feb. 3 - 1922</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
8) FULL NAME	10) NAME BEFORE MARRIAGE		<u>Elizabeth Hancey</u>	
9) PRESENT POSTOFFICE OF FATHER	11) PRESENT POSTOFFICE OF MOTHER		<u>Berlin</u>	
12) COLOR OR RACE	13) AGE AT LAST BIRTHDAY		14) COLOR OR RACE	
<u>White</u>	<u>26</u> (Years)		<u>White</u>	
15) BIRTHPLACE	16) BIRTHPLACE		17) AGE AT LAST BIRTHDAY	
<u>SC</u>	<u>SC</u>		<u>21</u> (Years)	
18) OCCUPATION	19) OCCUPATION		<u>Housewife</u>	
20) Number of children born to mother, including present birth			21) Number of children of this mother now living, including present birth	
<u>1</u>			<u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

Given name added from a supplemental report

(26) Witness Hubert S. C.
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Oct. 7 - 1922 J. H. Martin
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.