

(1) PLACE OF BIRTH

County of RockinghamTownship of Broad RiverOR
Inc. Town ofOR
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child James Milan Claude Slice (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 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec. 26, 1922
(Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Wendell Slice</u>	(14) NAME BEFORE MARRIAGE <u>Jimmie Winfred Keadler</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Chapin</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Shapers</u>
(10) COLOR OR RACE <u>white</u>	(16) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>27</u> (Years)	(17) AGE AT LAST BIRTHDAY <u>25</u> (Years)
(12) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>S.C.</u>	(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>Housewife</u>
(20) Number of children born to mother, including present birth <u>3</u>	(21) Number of children of this mother now living, including present birth <u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 11:10 P. (Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) J. H. Hearn (24) State whether Physician or Midwife M.D. (25) Address of Physician or Midwife Little Mountain

Given name added from a supplemental report	(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
..... 19	(27) Filed <u>Jan. 8, 1923</u> (28) <u>Wm. N. F. Lusk</u> 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.

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthFile No.—For State Registrar Only
43482Registration District No. 3103 Registered No. 19
(For use of Local Registrar)

(No. St.; Ward)

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