

Form No. 1

(1) PLACE OF BIRTH

County of HorrysTownship of Green Sea

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

30756

Registration District No. 38-76 Registered No. 96

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sept 10 22</u>
(Name of Month) (Day) (Year)				

FATHER.

(8) FULL NAME John Anderson(9) PRESENT POSTOFFICE OF FATHER Loris P.O. R1(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 21 (Year)(12) BIRTHPLACE Columbus Co. N.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Lee Naisand(15) PRESENT POSTOFFICE OF MOTHER Loris P.O. R1(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Year)(18) BIRTHPLACE Columbus Co. N.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 5:40 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Letitia Williams(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Loris P.O. R1

Given name added from a supplemental report

(26) Witness John Anderson (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Sept 12 1922 (28) Ed. B. B. B. 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.

WRITING PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 5. MCGRAW-HILL BOOK COMPANY, COLUMBIA, S. C.