

(1) PLACE OF BIRTH

County of LexingtonTownship of Christiansburgor
Inc. Town ofor
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

43484

Registration District No. 3184 Registered No. 30
(For use of Local Registrar)

(2) Full Name of Child

Daisy Hartley

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

(3) BOY OR GIRL

Girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

BIRTH 10/30/1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Gilman O. H. Hallman

(9) PRESENT POSTOFFICE OF FATHER

Batesburg, S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

32
(Year)

(12) BIRTHPLACE

Lexington Co., S.C.

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

5

MOTHER.

(14) NAME BEFORE MARRIAGE

Lillian Hartley

(15) PRESENT POSTOFFICE OF MOTHER

Batesburg, S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

33
(Year)

(18) BIRTHPLACE

Lexington Co., S.C.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

4

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)

L. M. Mitchell

(24)

State whether Physician or Midwife

(25) Address of Physician or Midwife

Batesburg, 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

Dec 31 1922

(28)

A. B. Quattlebaum
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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