

NOTE.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRSTBORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Laurens
Township of Wicks
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

15596

Registration District No. 2901

Registered No. 28
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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 3

(6) Are Parents Married? yes

(7) DATE OF BIRTH

May 6th 1922
(Name of Month) (Day) (Year)

(8) FULL NAME

FATHER Jully Woods

(9) PRESENT POSTOFFICE OF FATHER

Owings S.C. #2

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

39
(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farmer

(14) NAME BEFORE MARRIAGE

MOTHER Nell McCuen

(15) PRESENT POSTOFFICE OF MOTHER

Owings S.C. #2

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

35
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Housewife

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

3

(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 at 6 a.m. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. B. Stewart

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Foreman S. M. Co

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed June 8, 1922

(28) M. C. Mahan

(29) 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.