

Form No. 1

## (1) PLACE OF BIRTH

County of DarlingtonTownship of Lancasteror  
Inc. Town of.....or  
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

18342

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

(No. .... St.; .... Ward)

## (2) Full Name of Child

J. M. Lee Watfard

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

3 BOY OR  
GIRL?4 Twin  
or Triplet?

To be answered only in event of Twins or Triplets

5 Number in  
order of birth6 Are  
Parents  
Married? yes7 DATE OF  
BIRTHJune 12, 1922  
(Name of Month) (Day) (Year)

## FATHER.

8 FULL  
NAMEDock Watfard9 PRESENT  
POSTOFFICE  
OF FATHERLancaster10 COLOR  
OR  
RACEwhite(11) AGE AT LAST  
BIRTHDAY55  
(Years)

12 BIRTHPLACE

SC

13 OCCUPATION

Farmer20 Number of children born to  
mother, including present birth1

## MOTHER.

14 NAME BEFORE  
MARRIAGESallie Hall15 PRESENT  
POSTOFFICE  
OF MOTHERLancaster16 COLOR  
OR  
RACEwhite(17) AGE AT LAST  
BIRTHDAY35  
(Years)

18 BIRTHPLACE

SC

19 OCCUPATION

Housewife21 Number of children of this mother  
now living, including present birth1

## 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. Carson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

LancasterGiven name added from a supplement-  
tal report

(26) Witness

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

(27) Filed

June 29, 1922

(28)

R. J. Chaplin  
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.