

## (1) PLACE OF BIRTH

County of Yamou  
 Township of Purmaney  
 or  
 Inc. Town of Bellert  
 or  
 City of Bellert

(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

Registration District No. 4202

File No.—For State Registrar Only

26526

Registered No. 520  
 (For use of Local Registrar)

(No. St. Ward)

(2) Full Name of Child Nancy Lou Revell

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

(3) BOY OR GIRL girl (4) Twin or Triplet No (5) Number in order of birth 4 (6) Age Parents Married yes (7) DATE OF BIRTH Sept 28, 1923  
 (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Cleyton Revell  
 (9) PRESENT POSTOFFICE OF FATHER Bellert S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Year)  
 (12) BIRTHPLACE Belton S.C.  
 (13) OCCUPATION Cotton Mill Operator  
 (14) Number of children born to mother, including present birth 4

## MOTHER

(14) NAME BEFORE MARRIAGE Louise Hawkins  
 (15) PRESENT POSTOFFICE OF MOTHER Bellert S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 26 (Year)  
 (18) BIRTHPLACE Morrow N.C.  
 (19) OCCUPATION Domestic  
 (20) 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 7:30 P.M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rebecca Brantley  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Bellert 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 Sept 7, 1923 (28) D. P. Hallman 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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