

## (1) PLACE OF BIRTH

County of Greenville  
 Township of Chick Springs  
 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

28500

Registration District No. 2207 Registered No. 177  
 (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 Garvin Alexander Wills, Jr. If child is not yet named, make supplemental report as directed

(1) SEX OR CHILD Boy (4) Twin or Triplet To be answered only in event of Twin or Triplet (5) Number in order of birth yes (6) Are Parents Married yes (7) DATE OF BIRTH Apr. 9, 1923  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Garvin Alexander Wills, Sr.(9) PRESENT POSTOFFICE OF FATHER Arlington,(10) COLOR OR RACE Caucasian (11) AGE AT LAST BIRTHDAY 30  
 (Year)(12) BIRTHPLACE Spartanburg County(13) OCCUPATION Truck driver, Apalache  
Wills

## MOTHER.

(14) NAME BEFORE MARRIAGE Stella Ballenger(15) PRESENT POSTOFFICE OF MOTHER Same as husband(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 39  
 (Year)(18) BIRTHPLACE Spartanburg County(19) OCCUPATION Housewife,(20) Number of children born to mother, including present birth 9(21) Number of children of this mother now living, including present birth 6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 4:30 P.M. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature](24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife [Address]

Given name added from a supplemental report

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

(27) Filed Apr. 3, 1923 (28) F. J. James 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.