

(1) PLACE OF BIRTH

County of CherokeeTownship of Goudleysvilleor
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

29457

Registration District No. 1002Registered No. 44

(For use of Local Registrar)

(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

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH June 25, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

B. B. Hughes

(9) PRESENT POSTOFFICE OF FATHER

Vickinsville Pte. #1

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

23
(Years)

(12) BIRTHPLACE

Goudleysville

(13) OCCUPATION

Farming

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Ruby M. Goudelock

(15) PRESENT POSTOFFICE OF MOTHER

Vickinsville Pte. #1

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

18
(Years)

(18) BIRTHPLACE

Goudleysville

(19) OCCUPATION

Housekeeping

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 7 P.M. on the date above stated.
(Born alive or stillborn) (Hour ~~P.M.~~ P.M.)

(23) (Signature)

S. R. Blakey M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Vickinsville, 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

Oct 10, 1922

(28)

S. R. Blakey
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.

Registrar

Local Registrar.

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PRINTED-BORN NO. 1. THE OTHER, NO. 2, etc., in question 5.
MCCAY OF COLUMBIA, COLUMBIA, S. C.