

(1) PLACE OF BIRTH

County of York
 Township of Donnabatch
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

Registration District No. 2600

File No.—For State Registrar Only

4263Registered No. 13
(For use of Local Registrar)

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

(2) Full Name of Child

Sauls

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>—</u> To be answered only in event of Twin or Triplet	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>July 3, 1922</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Thos Hedrick Sauls</u>			(14) NAME BEFORE MARRIAGE <u>Mary Woods</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Ridgeland, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Ridgeland, S.C.</u>	
(10) COLOR OR RACE <u>White</u>			(16) COLOR OR RACE <u>White</u>	
(11) AGE AT LAST BIRTHDAY <u>41</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>28</u> (Years)	
(12) BIRTHPLACE <u>S.C.</u>			(18) BIRTHPLACE <u>S.C.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother, including present birth <u>four</u>			(21) Number of children of this mother now living, including present birth <u>three</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 7:00 P.M. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. E. Smith, M.D.(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Ridgeland, S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Date

July 3, 1922

(28)

A. H. Smith

Local Registrar

*When there was no attending physician or midwife, the mother, father, or other person, should make this return. If a child breathes even once, it is considered as born. No report is desired of stillbirths.