

(1) PLACE OF BIRTH

County of Cherokee  
Township of Morgan  
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  
**25357**

Registration District No. 1004-12 Registered No. 61  
(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 Louise Alerion (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 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 22 1922  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME A. Alerion  
(9) PRESENT POSTOFFICE OF FATHER Gaffney R.F.D. 2  
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 19 (Years)  
(12) BIRTHPLACE N.C.  
(13) OCCUPATION Farming  
(20) Number of children born to mother, including present birth 1

MOTHER.  
(14) NAME BEFORE MARRIAGE Lillian Mills  
(15) PRESENT POSTOFFICE OF MOTHER Gaffney R.F.D. 2  
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 20 (Years)  
(18) BIRTHPLACE S.C.  
(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 Balme at 2 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. G. McInnis  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Cherokee S.C.

Given name added from a supplemental report  
.....  
.....  
..... 19 .....

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed 9-10-22 (28) J. B. Seng 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.

RECORDS OF COLUMBIA, COLUMBIA, S. C.  
MAGAZINE SHOWN FOR BINDING  
THIS IS A PERMANENT RECORD  
AND SHOULD BE KEPT IN A SAFE PLACE  
FOR THE LIFE OF THE CHILD