

Form No. 1

## (1) PLACE OF BIRTH

County of Greenwood

Township of .....

or  
Inc. Town of .....or  
City of .....(No. .... St.; .... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child Walter Vance

File No.—For State Registrar Only

22496

Registration District No. 2306. Registered No. .... 94....  
(For use of Local Registrar)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH 14th May 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Ernest Vance(9) PRESENT POSTOFFICE OF FATHER Greenville, S.C.(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 23....  
(Years)(12) BIRTHPLACE Greenville, S.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 1 Two

## MOTHER.

(14) NAME BEFORE MARRIAGE Annie Hill(15) PRESENT POSTOFFICE OF MOTHER Greenwood S.C.(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 30....  
(Years)(18) BIRTHPLACE Greenwood, S.C.(19) OCCUPATION Cook(21) Number of children of this mother now living, including present birth 1 Two

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive... at 1... A.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Carrie Mark Wright  
(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Greenville, S.C.

Given name added from a supplemental report

(26) Witness Mrs. Geo. S. Marshall  
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Aug. 10 19 22 (28) 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.MARGIN RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD, AND MARK THE  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the  
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECAP OF COLUMBIA, COLUMBIA, S. C.