

(1) PLACE OF BIRTH

County of Camberg
 Township of Superior
 or
 Inc. Town of Classe
 or
 City of _____

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

File No. — For State Registrar Only

13712

Registration District No. 421 Registered No. 558
 (For use of Local Registrar)

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

(3) BOY OR GIRL girl (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? no (7) DATE OF BIRTH May 19 1922
 (Name of Month) (Day) (Year)

FATHER			MOTHER		
(8) FULL NAME	<u>Milder Stegler</u>		(14) NAME BEFORE MARRIAGE	<u>Orrie Grimes</u>	
(9) PRESENT POSTOFFICE OF FATHER	<u>Augusta Ga.</u>		(15) PRESENT POSTOFFICE OF MOTHER	<u>Classe</u>	
(10) COLOR OR RACE	<u>col</u>		(16) COLOR OR RACE	<u>col</u>	
(11) AGE AT LAST BIRTHDAY	<u>38</u> (Years)		(17) AGE AT LAST BIRTHDAY	<u>22</u> (Years)	
(12) BIRTHPLACE	<u>Washington D.C.</u>		(18) BIRTHPLACE	<u>Bonny Co</u>	
(13) OCCUPATION	<u>Bible Teacher</u>		(19) OCCUPATION	<u>general house work</u>	
(20) Number of children born to mother, including present birth	<u>2</u>		(21) Number of children of this mother now living, including present birth	<u>2</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 a.m.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) America Braxton

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

midwife Classe

Gives name added from a supplemental report.

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

(27) Signed May 28 1922 (28) J. E. Bennett 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.