

(1) PLACE OF BIRTH

County of H. KershawTownship of Del. Alb.OR
Inc. Town of.....OR
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 Only

43075

Registration District No. 2-7-01 Registered No. 2-5-3
(For use of Local Registrar)(2) Full Name of Child Ralph Leithbroath Davis { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Boy (4) Twin or Triplet? ☒ (5) Number in order of birth 2 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec. 21, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Claram A. Davis(9) PRESENT POSTOFFICE OF FATHER Camden, S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26
(Years)(12) BIRTHPLACE Colquitt Co. Ga.(13) OCCUPATION Wichard Green(20) Number of children born to mother, including present birth Two

MOTHER.

(14) NAME BEFORE MARRIAGE Leitia May Edmondson(15) PRESENT POSTOFFICE OF MOTHER Camden, S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21
(Years)(18) BIRTHPLACE Dothan, Ala.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5:30 A.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Le. Green

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

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Dec. 23, 1922 (28) H. Nelson
Registrar 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.*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
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