

(1) PLACE OF BIRTH

County of Anderson
 Township of Williamston
 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. 3-CNo. 38443 - For State Registrar OnlyRegistered No. 113
(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 Grace Peyton Loeis
 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 Dec. 24 1924
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Pink Loeis
 (9) PRESENT POSTOFFICE OF FATHER Williamston, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 48 (Years)
 (12) BIRTHPLACE Pelzer, S.C.
 (13) OCCUPATION Farmer
 (14) Number of children born to mother, including present birth 8

MOTHER.

(15) NAME BEFORE MARRIAGE Ida Creamer
 (16) PRESENT POSTOFFICE OF MOTHER Williamston, S.C.
 (17) COLOR OR RACE White (18) AGE AT LAST BIRTHDAY 45 (Years)
 (19) BIRTHPLACE Williamston, S.C.
 (20) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9 P. M.
 on the date above stated. Born alive or stillborn Hour A. M. or P. M.

(23) (Signature) Alley Loeis Williamston, S.C.
 (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 1-9- 1924 (28) Lillian Russell 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.

Registrar 1

*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.