

(1) PLACE OF BIRTH

County of Aiken, S.C.
Township of Aiken
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

9706

Registration District No. 215

Registered No. 17
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
City of Montmorenci, S.C. St. at home Ward

(2) Full Name of Child Willie Butler

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? Ors (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH 3-2-22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charlie Butler
(9) PRESENT POSTOFFICE OF FATHER Montmorenci, S.C.
(10) COLOR OR RACE Color (11) AGE AT LAST BIRTHDAY 5-6 (Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION farmer
(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Ella Butler
(15) PRESENT POSTOFFICE OF MOTHER Montmorenci, S.C.
(16) COLOR OR RACE Color (17) AGE AT LAST BIRTHDAY 32 (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION forming
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Midwife at 6 am M., on the date above stated. (Born alive or stillborn) live (M. or P. M.)

(23) (Signature) Mamanda Johnson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Montmorenci

Given name added from a supplemental report

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

(27) Filed 3 10 22 (28) O. K. Smith 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.