

MARCH 1935 - NO FOR BIRTHS
 WITH PLAINLY, WITH UNPAID, etc. THIS IS A SEPARATE BLANK FOR EACH CHILD, 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.
 Sec. of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Laurens S.C.

Township of

or
Inc. Town of Laurens S.C.

or
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lee Carol Crockett

File No. - For State Registrar Only
35099

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 28a Registered No. 58
(For use of Local Registrar)

(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 Sept 22, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Harmon Crockett

(9) PRESENT POSTOFFICE OF FATHER Laurens S.C.

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 21
(Years)

(12) BIRTHPLACE Laurens S.C.

(13) OCCUPATION Brick Layer

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Bonnie Edward

(15) PRESENT POSTOFFICE OF MOTHER Laurens S.C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 20
(Years)

(18) BIRTHPLACE Rockingham N.C.

(19) OCCUPATION House Keeper

(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 Born alive at 11:30 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary J. Witherspoon

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Laurens S.C.

Given name added from a supplemental report

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

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(27) Filed 10-4 19

Registrar

(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.

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