

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

File No.—For State Registrar Only
9895

(1) **PLACE OF BIRTH**

County of *Anderson*
 Township of *Hopewell*
 or
 Inc. Town of _____
 or
 City of _____

Registration District No. *808*

Registered No. *7*
 (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** *Mary Hunter*
 (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?** *Yes* (7) **DATE OF BIRTH** *Jun 31 22*
 (Name of Month) (Day) (Year)

FATHER.

(8) **FULL NAME** *Arthur Hunter*
 (9) **PRESENT POSTOFFICE OF FATHER** *Anderson #1*
 (10) **COLOR OR RACE** *col* (11) **AGE AT LAST BIRTHDAY** *43*
 (Year) _____
 (12) **BIRTHPLACE** *Anderson*
 (13) **OCCUPATION** *Farmer*
 (20) **Number of children born to mother, including present birth** *10*

MOTHER.

(14) **NAME BEFORE MARRIAGE** *Edna Williams*
 (15) **PRESENT POSTOFFICE OF MOTHER** *Anderson SC*
 (16) **COLOR OR RACE** *col* (17) **AGE AT LAST BIRTHDAY** *44*
 (Year) _____
 (18) **BIRTHPLACE** *Anderson Co*
 (19) **OCCUPATION** *Domestic*
 (21) **Number of children of this mother now living, including present birth** *4*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was *alive* at *13:00* M., on the date above stated. (Born alive or still born) (Hour A. M. or P. M.)

(23) **(Signature)** *Mary Rice*
 (24) **State whether Physician or Midwife** *midwife* (25) **Address of Physician or Midwife** *Anderson*

Given name added from a supplemental report

(Signature of Witness necessary only when question 23 is signed by mark)
May 2 23 J.M. Anderson
 Local Registrar

When there was no attending physician or midwife, the father, householder, etc., should make this return. If a child breathes even once, it should be reported as a live birth. No report is desired of stillbirths.