

Form No. 1

(1) PLACE OF BIRTH

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

File No.—For State Registrar Only

43342

County of Lee

Township of

or

Inc. Town of Bishopville

or

City of

Registration District No. 3rdRegistered No. 33
(For use of Local Registrar)

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

(2) Full Name of Child Willie Stephen Wiley (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

BIRTH Nov 9 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Stephen Wiley Jr

(9) PRESENT POSTOFFICE OF FATHER

Bishopville S.C.

(10) COLOR OR RACE

Col

(11) AGE AT LAST BIRTHDAY

21
(Years)

(12) BIRTHPLACE

Hershaw Co

(13) OCCUPATION

Long Labor

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

12

MOTHER.

(14) NAME BEFORE MARRIAGE

Bessie Thom

(15) PRESENT POSTOFFICE OF MOTHER

Bishopville S.C.

(16) COLOR OR RACE

Col

(17) AGE AT LAST BIRTHDAY

19
(Years)

(18) BIRTHPLACE

Hershaw Co

(19) OCCUPATION

Domestic

(21) Number of children of this mother now living, including present birth

12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Rena Green

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Bishopville S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Nov 9 1922

(28)

Mrs. N. J. Lane

Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child's brother even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.