

(1) PLACE OF BIRTH

County of FairfieldTownship of Bridgeway SeInc. Town of ...City of Bridgeway

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

30080

Registration District No. 907 Registered No. 65
(For use of Local Registrar)(2) Full Name of Child Willie Mae Ella Henderson (If child is not yet named, make supplemental report as directed)(3) BOY OR GIRL girl(4) Twin or Triplet? To be answered only in event of Twin or Triplets

(5) Number in order of birth

(6) Are Parents Married? no(7) DATE OF BIRTH sep 11 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Willie Henderson(9) PRESENT POSTOFFICE OF FATHER Bridgeway S.C.(10) CO. OR OR RACE colored (11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE Fairfield Co(13) OCCUPATION mid wife martha games(20) Number of children born to mother, including present birth 1 games

MOTHER.

(14) NAME BEFORE MARRIAGE Mellie Walker(15) PRESENT POSTOFFICE OF MOTHER Bridgeway S.C.(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 10 (Years)(18) BIRTHPLACE Fairfield(19) OCCUPATION mid wife martha games(21) Number of children of this mother now living, including present birth 1 games

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Martha at 9:00 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Mid White

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness 1 1
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed 9/16 22 (28) L. E. Hooten 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.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
MOD. OF COLUMBIA, COLUMBIA, S. C.