

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Lancaster
 Township of Indian Land
 Inc. Town of.....
 or
 City of.....

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

File No.—For State Registrar Only

19209

Registration District No. 2805Registered No. 11
(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 Buelah Harriett Turner

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH May 22
 To be answered only in event of Twin or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Henry Turner
 (9) PRESENT POSTOFFICE OF FATHER Fort Mill, S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 30
 (12) BIRTHPLACE Union Co.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Ethel Patterson
 (15) PRESENT POSTOFFICE OF MOTHER Fort Mill, S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 21
 (18) BIRTHPLACE Lancaster Co.
 (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 3

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1 P.M. on the date above stated.
 (born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rachel Phillips

(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Fort Mill, S.C.

Given name added from a supplemental report

(26) Witness Mrs. E. L. Patterson
 (Signature of Witness necessary only when question 23 is signed by mark)

B. J. Richardson (27) Filed June 10 1922 (28) B. J. Richardson
 Registrar 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.