

## (1) PLACE OF BIRTH

County of ChesterfieldTownship of Pee Deeor  
Inc. Town of.....or  
City of.....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

18212

Registration District No. 1218 Registered No. ....  
(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

William Bolling StokesIf child is not yet named, make  
supplemental report as directed(3) BOY OR  
GIRL? Boy(4) Twin  
or Triplet?(5) Number in  
order of birth  
To be answered only in event of Twins or Triplets(6) Are  
Parents  
Married? Yes(7) DATE OF  
BIRTH June 6, 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL  
NAME Frank F. Stokes(9) PRESENT  
POSTOFFICE  
OF FATHERSociety Hill S.C.(10) COLOR  
OR  
RACE White(11) AGE AT LAST  
BIRTHDAY 38  
(Years)

(12) BIRTHPLACE

Society Hill S.C.

(13) OCCUPATION

Farming(20) Number of children born to  
mother, including present birth3

## MOTHER.

(14) NAME BEFORE  
MARRIAGEAntony Watts(15) PRESENT  
POSTOFFICE  
OF MOTHERSociety Hill S.C.(16) COLOR  
OR  
RACE White(17) AGE AT LAST  
BIRTHDAY 35  
(Years)

(18) BIRTHPLACE

Society Hill S.C.

(19) OCCUPATION

Housewife(21) Number of children of this mother  
now living, including present birth3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 7 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) James H. Hester

(24) State whether Physician or Midwife

(25) Address of Physic or Midwife

PhysicianCharleston S.C.Given name added from a supplement-  
tal report

(26) Witness .....

(Signature of Witness necessary only  
when question 23 is signed by mark)(27) Filed June 16, 1922(28) D. S. Matheson

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.