

(1) PLACE OF BIRTH

County of Lancaster
 Township of Mott
 or
 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

18648

Registration District No. 2012 Registered No. 41
 (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 Mildred Louise Rush (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 3 6. Are Parents Married? Y 7. DATE OF BIRTH May 7 1922
 (Name of Month) (Day) (Year)

FATHER.

8. FULL NAME William Rush
 9. PRESENT POSTOFFICE OF FATHER Clinton SC
 10. COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 21 (Years)
 12. BIRTHPLACE Lancaster Co
 13. OCCUPATION Farmer
 20. Number of children born to mother, including present birth 3

MOTHER.

14. NAME BEFORE MARRIAGE Genevieve Nobles
 15. PRESENT POSTOFFICE OF MOTHER Clinton 23
 16. COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 23 (Years)
 18. BIRTHPLACE Lancaster Co
 19. OCCUPATION House Keeping
 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... Alvin ...at 10:20 P.M.,
 (Born alive or stillborn) (Hour A. M. or P. M.)
 on the date above stated.

(23) (Signature) C. H. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Lake City, SC #1

Given name added from a supplemental report

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

(27) Filed 5/18 1922 (28) A. D. Kelly 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.

WHILE PLAINLY, WITH UNFADING INK—THEN IN A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 5.