

(1) PLACE OF BIRTH

County of Berkeley
 Township of 1st
 or
 Loc. 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

17669

Registration District No. 700 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 Chasie Lollar If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH June 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME A.C. Lollar
 (9) PRESENT POSTOFFICE OF FATHER Cross St.
 (10) COLOR OR RACE Colord (11) AGE AT LAST BIRTHDAY 41
 (12) BIRTHPLACE Berkeley Co
 (13) OCCUPATION Farmer
 (14) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Chasie Lollar
 (15) PRESENT POSTOFFICE OF MOTHER Cross St.
 (16) COLOR OR RACE Colord (17) AGE AT LAST BIRTHDAY 31
 (18) BIRTHPLACE Berkeley Co
 (19) OCCUPATION House Wife
 (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 alive at M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Louisa Nash
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife mid wife 1012 9th St

Given name added from a supplemental report

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

(27) Filed June 9 1922 (28) W. L. Smith 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.