

(1) PLACE OF BIRTH

County of Laurens
 Township of Cross Hill
 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

30951

Registration District No. 2900Registered No. 33
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St. Ward)

(2) Full Name of Child Amie Mae Hill

If child is not yet named, make
 supplemental report as directed

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married <u>yes</u>	(7) DATE OF BIRTH <u>Sept 15 1922</u> (Name) (Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Jimm Hill</u>			(14) NAME BEFORE MARRIAGE <u>Jennie Boyd</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Chippells, S.C. R#1</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Chippells, S.C. R#1</u>	
(10) COLOR OR RACE <u>Black</u>			(16) COLOR OR RACE <u>Black</u>	
(11) AGE AT LAST BIRTHDAY <u>23</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>24</u> (Years)	
(12) BIRTHPLACE <u>Newberry Co. S.C.</u>			(18) BIRTHPLACE <u>Laurens Co. S.C.</u>	
(13) OCCUPATION <u>Farm Hand</u>			(19) OCCUPATION <u>Farm Hand</u>	
(20) Number of children born to mother, including present birth <u>3</u>			(21) Number of children of this mother now living, including present birth <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11 a.m. on the date above stated.
 (Born alive or stillborn) (Hour & M. or P. M.)

(23) (Signature) Betty Boyd

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed

Sept 171922

(28)

D. B. Gray

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. Its report is desired of stillbirths before the fifth month of pregnancy.