

(1) PLACE OF BIRTH

County of Cherokee

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

3526

Township of SimsboroInc. Town of LaurensRegistration District No. 109 Registered No. 16City of Laurens (No. 109 St. 16 Ward 16)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Grace Geraldine Hull If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? girl (4) Twin single or Triplet? (5) Number in order of birth 9 (6) Are Parents Married? yes (7) DATE OF BIRTH (Name of Month) (Day) (Year) Jan 4 1922

FATHER.

(8) FULL NAME Bernard B Hill(9) PRESENT POSTOFFICE OF FATHER Spartanburg(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 32 (Years)(12) BIRTHPLACE Spartanburg, S.C.(13) OCCUPATION minister(14) Number of children born to mother, including present birth 9

MOTHER

(14) NAME BEFORE MARRIAGE Sarah Hill(15) PRESENT POSTOFFICE OF MOTHER Spartanburg(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 40 (Years)(18) BIRTHPLACE Spartanburg, S.C.(19) OCCUPATION housewife(20) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 2:55 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) M. Hill (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Gaffney, S.C.

Given name added from a supplemental report

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

(27) Filed March 1922 (28) W. J. 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.

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THIS IS 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 3.

McGraw, of 11th Street