

Form No. 1

(1) PLACE OF BIRTH

County of AndersonTownship of Williamston

or

Inc. Town of Pelzer, S.C.

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

20858

Registration District No. 32Registered No. 913
(For use of Local Registrar)

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

(2) Full Name of Child

Charles Morgan

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

3. BOY OR GIRL boy4. Twin or Triplet? -5. Number in order of birth 3(6) Are Parents Married? yes(7) DATE OF BIRTH July 29, 1922

To be answered only in event of Twins or Triplets

(Name of Month) (Day) (Year)

FATHER.

MOTHER.

8. FULL NAME W. W. Fleming(14) NAME BEFORE MARRIAGE Annie Morgan9. PRESENT POSTOFFICE OF FATHER Pelzer S.C.(15) PRESENT POSTOFFICE OF MOTHER Pelzer S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 29
(Years)(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 29
(Years)(12) BIRTHPLACE Richmond County(18) BIRTHPLACE S.C.(13) OCCUPATION Mill work(19) OCCUPATION Domestic(20) Number of children born to mother, including present birth 13(21) Number of children of this mother now living, including present birth 13

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. W. Fleming

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Pelzer S.C.

Given name added from a supplemental report

(26) Witness

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

(27) File July 30, 1922

(28)

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.