

(1) PLACE OF BIRTH

County of NewberryTownship of Litch Mtnor Inc. Town of Litch Mtnor City of Litch Mtn

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

39464

Registered No. 55
(For use of Local Registrar)

Registration District No. 3401

(2) Full Name of Child Ralph Hawkins

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

(3) BOY OR GIRL

boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? No

(7) DATE OF

BIRTH Nov 30 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

— Turner

(9) PRESENT POSTOFFICE OF FATHER

Asheville N.C.

(10) COLOR OR RACE

Black

(11) AGE AT LAST BIRTHDAY

26
(Years)

(12) BIRTHPLACE

(13) OCCUPATION

Hotel Porter

MOTHER.

(14) NAME BEFORE MARRIAGE

Bessie Hawkins

(15) PRESENT POSTOFFICE OF MOTHER

Litch Mtn S.C.

(16) COLOR OR RACE

Black

(17) AGE AT LAST BIRTHDAY

22
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Cook

(20) Number of children born to mother, including present birth

1

(21) Number of children of this mother now living, including present birth

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 4 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

M.B. [Signature]

(26) Witness

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

(27) Filed

Dec 10 1922

(28)

Elberta Seane 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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