

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—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 6.

RECEIVED BY CLERK, CHIEF, S. C.

(1) PLACE OF BIRTH

County of Auderson
Township of Williamston
or
Inc. Town of Pelzer, S.C.
City of _____

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

191

Registration District No. 38

Registered No. 13
(For use of Local Registrar)

(2) Full Name of Child Mary Elizabeth Ballard

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

(3) BOY OR GIRL girl (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 13, 1924
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Alonzo Ballard
(9) PRESENT POSTOFFICE OF FATHER Pelzer, S.C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 40 (Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION mill work
(20) Number of children born to mother, including present birth Seven

MOTHER.

(14) NAME BEFORE MARRIAGE Edell Gamble
(15) PRESENT POSTOFFICE OF MOTHER Pelzer, S.C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 40 (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION domestic
(21) Number of children of this mother now living, including present birth Seven

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 8:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. T. Mott

(24) State whether Physician or Midwife 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 mother)

(27) Filed Feb 9, 1924

W. T. Mott
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.