

(1) PLACE OF BIRTH

County of Georgetown  
Township of #2  
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  
**21025**

Registration District No. 2101 Registered No. 30  
(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 Hell Grant

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

(3) SEX MALE (4) Twin or Triplet No (5) Number in order of Birth 1 (6) Age at Birth yo (7) DATE OF BIRTH July 27, 23

FATHER  
(8) FULL NAME Andrew Grant  
(9) PRESENT POSTOFFICE OF FATHER Georgetown, S.C. #2  
(10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 30  
(12) BIRTHPLACE Sampit, S.C.  
(13) OCCUPATION Public work

MOTHER  
(14) NAME BEFORE MARRIAGE Lezzie Oden  
(15) PRESENT POSTOFFICE OF MOTHER Georgetown, S.C. #2  
(16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 26  
(18) BIRTHPLACE Sampit, S.C.  
(19) OCCUPATION Field work

(20) Number of children born to mother, including present birth 5 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Joe Anna Oden  
(24) State Physician or Midwife (25) Address of Physician or Midwife Georgetown, S.C. #2

Given name added from a supplemental report

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

(27) Filed 7/27, 1923 (28) Ag. S. Patton 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.

FIRST-MORN., No. 1. THE OTHER, No. 2, etc., in question 2. Bureau of Columbia, Columbia, S. C.