

## (1) PLACE OF BIRTH

County of Spartanburg  
 Township of Campobello  
 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

9139

Registration District No. 4001 BRegistered No. 10

(For use of Local Registrar)

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

(2) Full Name of Child Martha Wardell

(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? \_\_\_\_\_ (7) DATE OF BIRTH March 15 1922  
 (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Charlie Wardell  
 (9) PRESENT POSTOFFICE OF FATHER Campobello SC. R#4  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29 (Year)  
 (12) BIRTHPLACE Union County SC.  
 (13) OCCUPATION Farmer

## MOTHER

(14) MARRIAGE BEFORE first time  
 (15) PRESENT POSTOFFICE OF MOTHER Campobello SC. R#4  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Year)  
 (18) BIRTHPLACE Spartanburg Co. SC.  
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 1 11

(21) Number of children of this mother now living, including present birth 1 11

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 1 2 M., on the date above stated.  
 (Born alive or stillborn) (Hour M. or P.M.)

(23) (Signature) Midwife Carrie A. Jones, M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplementary report

(26) Witness

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

(27) Date March 15 1922 (28) Dr. T. Bishop 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 should be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.