

Form No. 1

## (1) PLACE OF BIRTH

County of Barnwell  
 Township of Red Bank  
 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

40994

Registration District No. 5-29 Registered No. 64  
 (For use of Local Registrar)

(No. .... St.; .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child William Robert If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? Twins (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 21 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME August Robert(9) PRESENT POSTOFFICE OF FATHER Barnwell(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 37  
 (Year)(12) BIRTHPLACE S. C.(13) OCCUPATION Farmer(14) NAME BEFORE MARRIAGE Petter Sleeth(15) PRESENT POSTOFFICE OF MOTHER Barnwell(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 36  
 (Year)(18) BIRTHPLACE S. C.(19) OCCUPATION Farmer(20) Number of children born to mother, including present birth 8(21) Number of children of this mother now living, including present birth 7

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Charles H. Parker(24) State whether Physician or Midwife Physician

Given name added from a supplemental report

(25) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mark)(26) Filed Dec 29 1922 (27) Mrs. Parker 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.