

(1) PLACE OF BIRTH

County of Pickens
 Township of Central
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

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

No. 18783

Registration District No. 221 Registered No. 114
 (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 Ruth Helen Leopold If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Sex Female (7) DATE OF BIRTH June 5, 1923
 To be reported only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME J. H. Van Leopold

(9) PRESENT POSTOFFICE OF FATHER Central S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 25
 (Year)

(12) BIRTHPLACE D.C.

(13) OCCUPATION Textile - Worker

(14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Helen Ellen White

(15) PRESENT POSTOFFICE OF MOTHER Central S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21
 (Year)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housekeeper

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 2:45 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Van Leopold

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Central S.C.

Given name added from a supplemental report

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

(27) Filed June 5, 1923 (28) J. H. Van Leopold 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.