

(1) PLACE OF BIRTH

County of Darlington
 Township of Sydes
 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

18356

Registration District No. 1876Registered No. 08
(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 Elizabeth Murrell {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 first (6) Are Parents Married? yes (7) DATE OF BIRTH June 25 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wallace Murrell
 (9) PRESENT POSTOFFICE OF FATHER Lamorse R.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 22 (Years)
 (12) BIRTHPLACE Darling County
 (13) OCCUPATION farmer
 (20) Number of children born to mother, including present birth one

MOTHER.

(14) NAME BEFORE MARRIAGE Belle Register
 (15) PRESENT POSTOFFICE OF MOTHER Lamorse R.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE Darling County
 (19) OCCUPATION house wife
 (21) Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 7 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. B. Smith(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Sydes

Given name added from a supplemental report

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

(27) Filed June 22 1922 (28) R. B. Smith 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.

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