

## (1) PLACE OF BIRTH

County of

Township of

or

Prec. Town of

or

City of

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

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

24792

Registration District No. 315-

Registered No. 43  
(For use of Local Registrar)

(No. .... St.; .... Ward)

## (2) Full Name of Child

Perry W. Chester

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

3. BOY OR GIRL?

Boy

4. Twin or Triplet?

5. Number in order of birth

6. Are Parents Married?

yes

7. DATE OF BIRTH

Jan. 9, 22

(Name of Month) (Day) (Year)

## FATHER.

8. FULL NAME

Thomas Chester

9. PRESENT POSTOFFICE OF FATHER

Pendleton S.C. #2

10. COLOR OR RACE

Negro

11. AGE AT LAST BIRTHDAY

34

(Years)

12. BIRTHPLACE

SC

13. OCCUPATION

Farmer

## MOTHER.

14. NAME BEFORE MARRIAGE

Vastie Bruce

15. PRESENT POSTOFFICE OF MOTHER

Pendleton S.C. #2

16. COLOR OR RACE

Negro

17. AGE AT LAST BIRTHDAY

37

(Years)

18. BIRTHPLACE

SC

19. OCCUPATION

Domestic work

20. Number of children born to mother, including present birth

11

21. Number of children of this mother now living, including present birth

11

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature)

Mrs E. W. Thompson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Pendleton

Anderson St.

Give name added from a supplemental report

(26) Witness

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

(27) Filed

1/10

19

22

(28)

W. L. Casey

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.