

THIS IS A PERMANENT RECORD.
In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Laurins
Township of Cross Hill
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
30949

Registration District No. 2900 Registered No. 32
(For use of Local Registrar)

(2) Full Name of Child Harry Wm Workman
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 8 22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Harry Wm Workman
(9) PRESENT POSTOFFICE OF FATHER Chappells, S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE Newberry County, S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth Four

MOTHER.
(14) NAME BEFORE MARRIAGE Mary Eloise Burr
(15) PRESENT POSTOFFICE OF MOTHER Chappells S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 37 (Years)
(18) BIRTHPLACE Newberry County, S.C.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth Four

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) H. B. Semmes
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Cross Hill S.C.

Given name added from a supplemental report
..... 19 22 Registrar
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Sept 10 1922 (28) P. P. Gordon 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.

Registrar Local Registrar.
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