

## (1) PLACE OF BIRTH

County of Anderson  
 Township of Piedmont  
 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

17494

Registration District No..... Registered No. 28  
 (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 Barclay Drake If child is not yet named, make supplemental report as directed

3. BOY OR GIRL..... 4. Twin or Triplet?..... 5. Number in order of birth..... 6. Are Parents Married? yes 7. DATE OF BIRTH June 9, 1922  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

8. FULL NAME N. A. Dechapt.  
 9. PRESENT POSTOFFICE OF FATHER Belton SC  
 10. COLOR OR RACE white 11. AGE AT LAST BIRTHDAY 34  
 12. BIRTHPLACE Belton R D D  
 13. OCCUPATION farmer  
 20. Number of children born to mother, including present birth 4

## MOTHER.

14. NAME BEFORE MARRIAGE Tessa S. Campbell  
 15. PRESENT POSTOFFICE OF MOTHER Belton SC  
 16. COLOR OR RACE white 17. AGE AT LAST BIRTHDAY 35  
 18. BIRTHPLACE Belton SC  
 19. OCCUPATION house wife  
 21. Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was.... a live.... at 7.9.... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. B. Campbell(24) State whether Physician or Midwife (25) Address of Physician or Midwife Belton SC

Given name added from a supplemental report

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

(27) Filed July 10, 1922 (28) W. B. Campbell  
 Registrar 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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