

Form No. 1

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—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 5.

(1) PLACE OF BIRTH

County of Hampton
 Township of Lacater
 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

22554

Registration District No. 3401Registered No. 60
(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 William Bradley

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

(3) BOY OR GIRL GIRL(4) Twin or Triplet? X

To be answered only in case of Twins or Triplets

(5) Number in order of birth 2(6) Are Parents Married? Yes(7) DATE OF BIRTH June 9, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Louie Bradley(9) PRESENT POSTOFFICE OF FATHER Furman SC(10) COLOR OR RACE Col(11) AGE AT LAST BIRTHDAY 41
(Years)(12) BIRTHPLACE SC(13) OCCUPATION Laborn(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Annies Russell(15) PRESENT POSTOFFICE OF MOTHER Furman SC(16) COLOR OR RACE Col(17) AGE AT LAST BIRTHDAY 23
(Years)(18) BIRTHPLACE SC(19) OCCUPATION Wife(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 born alive at 7 A.M. on the date above stated.
(Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Louie Bradley(24) State whether Physician or Midwife(25) Address of Physician or Midwife Furman SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed 6/17/22(19) 1922

(23)

W. T. Ellis
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.