

Form No. 1.

MARGIN RESERVED FOR BINDING.
 V. WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 IF TRIPLETES use a SEPARATE BLANK FOR EACH CHILD, and make use
 of IN. No. 1. THIS OTHER, No. 2, etc., in question 6.

(1) PLACE OF BIRTH

County of Auderson
 Township of Lowville
 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

3036

Registration District No. 3.D.5Registered No. 14
 (For use of Local Registrar)

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

(2) Full Name of Child Annie Bertha Whitfield (If child is not yet named, make supplemental report as directed)

(1) BOY OR GIRL girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Feb 10 22
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charley T. Whitfield
 (9) PRESENT POSTOFFICE OF FATHER Lowville S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22 (Years)
 (12) BIRTHPLACE Auderson Co S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Abbie E. Gleason
 (15) PRESENT POSTOFFICE OF MOTHER Lowville S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)
 (18) BIRTHPLACE Auderson Smith Co Texas
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 6 45 A.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) J. M. Robinson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

name added from a supplemental report

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

(27) Filed Feb 20 1922 (28) F. H. Robinson Local Registrar

If 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.