

(1) PLACE OF BIRTH

County of Edgefield

Township of

or
Inc. Town of Edgefield

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

Registration District No. 8A

File No.—For State Registrar Only
30008

Registered No. 37
(For use of Local Registrar)

(2) Full Name of Child

Willard Edward Chamberlain Only is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept. 9, 1932
To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charlie C. Chamberlain

(9) PRESENT POSTOFFICE OF FATHER Edgefield, S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Year)

(12) BIRTHPLACE Ga

(13) OCCUPATION Insulator Worker

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Lily Turner

(15) PRESENT POSTOFFICE OF MOTHER Edgefield, S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36 (Year)

(18) BIRTHPLACE Saluda County

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) A. H. Nicholson (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Edgefield, S.C.

Given name added from a supplemental report

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

(27) Sept. 13, 1932 (28) Chas. D. Chamberlain 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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