

(1) PLACE OF BIRTH

County of York
 Township of Calowby
 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
20532

Registration District No. 4454 Registered No. 58
 (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

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

3. BOY OR GIRL? Boy
 (4) Twin or Triplet? No
 To be answered only in event of Twins or Triplets

5. Number in order of birth

6. Are Parents Married? Yes

7. DATE OF BIRTH Jan 18 22
 (Name of Month) (Day) (Year)

FATHER.

8. FULL NAME W. L. Bottine

9. PRESENT POSTOFFICE OF FATHER Clinton S.C. A#3

10. COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 37
 (Years)

12. BIRTHPLACE York County

13. OCCUPATION Farmer

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

MOTHER.

14. NAME BEFORE MARRIAGE Mary Elizabeth Sims

15. PRESENT POSTOFFICE OF MOTHER Clinton S.C. A#3

16. COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 30
 (Years)

18. BIRTHPLACE D.C.

19. OCCUPATION Domestic

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 at 4-48 M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. R. Gupton

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Clinton S.C.

Given name added from a supplemental report

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

(27) Filed 6-17 19 22 (28) J. H. H. H. 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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