

(1) PLACE OF BIRTH

County of Fairfield  
Township of Ridgeway  
or  
Inc. Town of .....

CERTIFICATE OF BIRTH  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No. — For State Registrar Only

17544

Registration District No. 2406 Registered No. 42  
(For use of Local Registrar)

City of ..... (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 Edward Mathew Squirewell (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet To be answered only in event of Twins or Triplets (5) Number in order of birth one (6) Are Parents Married? yes (7) DATE OF BIRTH June 12 1923  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Osborn Squirewell  
(9) PRESENT POSTOFFICE OF FATHER Nelson S C  
(10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 44  
(Year)  
(12) BIRTHPLACE Fairfield Co.  
(13) OCCUPATION Farming  
(14) Number of children born to mother, including present birth six

MOTHER.

(14) NAME BEFORE MARRIAGE Lucy M S Barker  
(15) PRESENT POSTOFFICE OF MOTHER Nelson S C  
(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 29  
(Year)  
(18) BIRTHPLACE Fairfield  
(19) OCCUPATION Farming  
(21) Number of children of this mother now living, including present birth five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive ... at 2 ... M.,  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.

(23) (Signature)

(24) State whether Physician or Midwife Mid wife

(25) Address of Physician or Midwife Ridgeway S C

Given name added from a supplemental report

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

(27) Filed June 12 1923 (28) J. E. Adkins 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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