

MARGIN RESERVE FOR BINDING.
WHITE PLAINS, N. Y.—In case of twins or triplets use a separate blank for each child, and mark the placental position, No. 1, the other, No. 2, etc., in question 8.
Registrar Columbia, Columbia, S. C.

(1) PLACE OF BIRTH
County of Sumter
Township of
or
Inc. Town of
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

File No.—For State Registrar Only
32410

Registration District No. H.1a Registered No. 183
(For use of Local Registrar)
(No. Throug Hospital St.; Calhoun St., Ward)

(2) Full Name of Child Livie Beard If child is not yet named, make supplemental report as directed

3) BOY OR GIRL	4) Twin or Triplet? <input checked="" type="checkbox"/> To be answered only in case of Twins or Triplets	5) Number in order of birth <u>1</u>	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>Sept 9</u> 19 <u>22</u> (Name) (Month) (Day) (Year)
FATHER.			MOTHER.	
8) FULL NAME <u>Thomas McSwain Beard</u>	14) NAME BEFORE MARRIAGE <u>Edith Bateman</u>			
9) PRESENT POSTOFFICE OF FATHER <u>Gables S.C.</u>	15) PRESENT POSTOFFICE OF MOTHER <u>Gables S.C.</u>			
10) COLOR OR RACE <u>white</u>	11) AGE AT LAST BIRTHDAY <u>29</u> (Year)	16) COLOR OR RACE <u>white</u>	17) AGE AT LAST BIRTHDAY <u>16</u> (Year)	
12) BIRTHPLACE <u>Turbeville S.C.</u>		18) BIRTHPLACE <u>Summerton S.C.</u>		
13) OCCUPATION <u>Lumber Inspector</u>		19) OCCUPATION <u>Housewife</u>		
20) Number of children born to mother, including present birth <u>1st</u>		21) Number of children of this mother now living, including present birth <u>1st</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. H. Moore
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Sumter 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 Oct 6 1922 (S) D. A. Dusenberry 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.

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.