

(2) PLACE OF BIRTH

County of Cherokee  
 Township of Towleysville  
 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

10444

Registration District No. 1002

Registered No. 15  
 (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 (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH April 23, 1922  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME W. M. Phillips  
 (9) PRESENT POSTOFFICE OF FATHER Gaffney S.C. Rte #6  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 41 (Year)  
 (12) BIRTHPLACE New Lenoirville  
 (13) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth 1

**MOTHER.**

(14) NAME BEFORE MARRIAGE Mary Minnie Harmon  
 (15) PRESENT POSTOFFICE OF MOTHER Gaffney S.C. Rte #6  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 41 (Year)  
 (18) BIRTHPLACE New Lenoirville  
 (19) OCCUPATION Housekeeping  
 (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 10:20 P.M. on the date above stated. (Born alive or stillborn) (Hour 10:20 P.M.)

(23) (Signature) S. E. Blalock, M.D.  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Wickensville S.C.

Given name added from a supplemental report

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

Sam J. Train 19 May 10, 1922 (28) Sam J. Train Local Registrar  
 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.

\*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.