

## (1) PLACE OF BIRTH

County of GreenvilleTownship of Bethlehemor  
Inc. Town ofor  
City of

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 2202

File No.—For State Registrar Only

42644Registered No. 74

(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?

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH Dec 3 1922  
(Name of Month) (Day) (Year)

## FATHER.

8) FULL NAME

Walter M. Chatham

9) PRESENT POSTOFFICE OF FATHER

Simpsonville S.C. R-1

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

27  
(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farmer

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

4

## MOTHER.

(14) NAME BEFORE MARRIAGE

Lucile Walker

(15) PRESENT POSTOFFICE OF MOTHER

Simpsonville S.C. R-1

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

24  
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Domestic

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

4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11:45 P.M., on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Simpsonville S.C. R-1

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Dec 11 1922

(28)

J. A. Jones

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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