

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Richland
Township of Blytheville
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

20016

Registration District No. 3830

Registered No. 79
(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

Stella Hammond

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

(3) BOY OR GIRL girl

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH June 19, 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Edwards Hammond

(9) PRESENT POSTOFFICE OF FATHER

Blytheville

(10) COLOR OR RACE

col

(11) AGE AT LAST BIRTHDAY 44
(Years)

(12) BIRTHPLACE

Frankford

(13) OCCUPATION

Farmer

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

6

MOTHER.

(14) NAME BEFORE MARRIAGE

Pink Young

(15) PRESENT POSTOFFICE OF MOTHER

Blytheville

(16) COLOR OR RACE

col

(17) AGE AT LAST BIRTHDAY 33
(Years)

(18) BIRTHPLACE

Blytheville

(19) OCCUPATION

Field work

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was.....
on the date above stated.

above at 3 P.M.
(Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature)

Ella Belle Drapp

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Blytheville

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 24, 22 (28) W. A. McLean
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.

MADE IN COLUMBIA, COLUMBIA, S. C.