

## (1) PLACE OF BIRTH

County of Anderson  
 Township of Pendleton  
 Inc. Town of .....  
 City of .....  
 (No. .... St. .... Ward .....)

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

Registration District No. 310

File No.—For State Registrar Only  
**9930**

Registered No. 40  
 (For use of Local Registrar)

(2) Full Name of Child Margie Hicks  
 If birth occurs in a hospital or other institution, give name of same instead of street and number.  
 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 ..... (6) Are Parents Married? yes (7) DATE OF BIRTH Apr 26 22  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME George Hicks  
 (9) PRESENT POSTOFFICE OF FATHER Pendleton, S. C.  
 (10) COLOR OR RACE bal. (11) AGE AT LAST BIRTHDAY 39  
 (12) BIRTHPLACE Anderson, Co.  
 (13) OCCUPATION Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE Charlotte Pickens  
 (15) PRESENT POSTOFFICE OF MOTHER Pendleton, S. C.  
 (16) COLOR OR RACE bal (17) AGE AT LAST BIRTHDAY 36  
 (18) BIRTHPLACE Anderson, Co.  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth Six

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 3 P. M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
 (23) (Signature) Millie Richey  
 (24) State whether Midwife (25) Address of Physician or Midwife Central, 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 May 18 1922 (28) N. W. Seawright  
 Registrar 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.