

(1) PLACE OF BIRTH

County of Cherokee

Township of

or

Inc. Town of Laffney

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

17974

Registration District No. 100Registered No. 137
(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 Ray Linley Martin

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

June 16 1927
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Louise Martin

(9) PRESENT POSTOFFICE OF FATHER

Laffney SC

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

29
(Years)

(12) BIRTHPLACE

Cherokee Co.

(13) OCCUPATION

Cotton mill

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Marie Pennington

(15) PRESENT POSTOFFICE OF MOTHER

Laffney SC

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

50
(Years)

(18) BIRTHPLACE

Laffney SC

(19) OCCUPATION

Housewife

(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 5:30 AM. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Ray Linley Martin

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

7/10

19

27

(28)

N. J. Smith

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.