

(1) PLACE OF BIRTH

County of FlorenceTownship of Courees

In Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

No. 10. - For State Registrar Only

3831

Registration District No. 2007 Registered No. 20
(For use of Local Registrar)(No. ... Ward)
If birth occurs in a hospital or other institution, give name of same instead of street and number.(2) Full Name of Child Daniel F. Hymen (If child is not yet named, make supplemental report as directed)1) SEX OR CHILD Boy 2) Type of Triple To be answered only in event of Triple 3) Number in order of birth4) Age of Mother 44 5) DATE OF BIRTH Jan 25, 23
(Name of Month) (Day) (Year)

FATHER.

6) FULL NAME Clyde Hymen7) PRESENT POSTOFFICE OF FATHER Hymen SC8) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Year)

9) BIRTHPLACE

10) OCCUPATION

11) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

12) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

13) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

14) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

15) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

16) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

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34) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BORN

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MOTHER.

14) NAME BEFORE MARRIAGE Essie Clifton15) PRESENT POSTOFFICE OF MOTHER Hymen SC16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 20 (Year)

18) BIRTHPLACE

19) OCCUPATION

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CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(28) I hereby certify that I attended the birth of this child, who was born at 1200

on the date above stated.

(29) (Signature) W. R. P. O. S. H.(30) State whether Physician or Midwife Physician(31) Address of Physician or Midwife King Geo St

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

(33) Date Feb. 1, 23 (34) Local Registrar

(35) If the father, householder, etc., should object to the return, he should be notified as follows. No report is desired of children born of pregnancy.

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