

(1) PLACE OF BIRTH

County of ... *Dixie* ...Township of ... *Belvidere* ...OF
Inc. Town of
OF

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

38267

Registration District No. *213*Registered No. *57*

(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child *William Edward Godman*

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 *1*(6) Are Parents Married? *Yes*

(7) DATE OF BIRTH

July 17 1914
(Time of Month) (Day) (Year)

FATHER

(8) FULL NAME

William Stewart Godman

(9) PRESENT POSTOFFICE OF FATHER

Belvidere - S. C.(10) COLOR OR RACE *W*(11) AGE AT LAST BIRTHDAY *31*

(Years)

(12) BIRTHPLACE

Durham, N.C.

(13) OCCUPATION

Auto Mechanic

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

1

MOTHER

(14) NAME BEFORE MARRIAGE

Minnie Eliza Woods

(15) PRESENT POSTOFFICE OF MOTHER

Belvidere - S. C.(16) COLOR OR RACE *W*(17) AGE AT LAST BIRTHDAY *28*

(Years)

(18) BIRTHPLACE

Hope Court, N.C.

(19) OCCUPATION

Housewife

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was *born alive* on the date above stated.(Hour A. M. or P. M.) *12*(23) (Signature) *H. W. W. W.*(24) State whether Physician or Midwife *Physician*(25) Address of Physician or Midwife *North Myrtle Beach, S.C.*

Even name added from a supplemental report

101

Registrar

(26) Witness

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

(27) Filed *1-14**1914*

(28)

A. L. Medlock
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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