

(1) PLACE OF BIRTH

County of RichmondTownship of Assembly

Inc. Town of

City of Clearwater(2) Full Name of Child Irma Elizabeth Murphy

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. 31428

31428

Registration District No. 21 S. R. Registered No. 147

(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.)

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or triplet? <u>no</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>11</u> <u>3</u> <u>13</u>
FATHER.				MOTHER.
(8) FULL NAME <u>Geo Frank Murphy</u>				(14) NAME BEFORE MARRIAGE <u>Irma Lee Meurer</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Clearwater, FL.</u>				(15) PRESENT POSTOFFICE OF MOTHER <u>Clearwater, FL.</u>
(10) COLOR OR RACE <u>white</u>	(11) AGE AT LAST BIRTHDAY <u>31</u>	(16) COLOR OR RACE <u>white</u>	(17) AGE AT LAST BIRTHDAY <u>30</u>	
(12) BIRTHPLACE <u>Augusta, Ga</u>		(18) BIRTHPLACE <u>Augusta, Ga</u>		
(13) OCCUPATION <u>Mill Worker</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>5</u>		(21) Number of children of this mother now living, including present birth <u>4</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 11 P M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) L. W. Spadley

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Langley, 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 Dec 1, 1913 (28) L. W. Spadley 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.

*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.