

Form No. 1

(1) PLACE OF BIRTH

County of SpartanburgTownship of Providence

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No. — For State Registrar Only

1933 4

Registration District No. 4.1.95 Registered No. 7.7
(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 James Edward Hunt If child is not yet named, make supplemental report as directed

3) BOY OR GIRL <u>Boy</u>	4) Twin or Triplet To be answered only in event of Twin or Triplet	5) Number in order of birth	6) Are Parents Married <u>yes</u>	7) DATE OF BIRTH (Name of Month) (Day) (Year) <u>June 18 1923</u>
FATHER.			MOTHER.	
8) FULL NAME <u>Emmanuel Hunt</u>			14) NAME BEFORE MARRIAGE <u>Zelphie Harry</u>	
9) PRESENT POSTOFFICE OF FATHER <u>Swega J. G.</u>			15) PRESENT POSTOFFICE OF MOTHER <u>Swega J. G.</u>	
10) COLOR OR RACE <u>Cel</u>			16) AGE AT LAST BIRTHDAY <u>21</u>	
11) BIRTHPLACE <u>S. C.</u>			17) COLOR OR RACE <u>Cel</u>	
12) OCCUPATION <u>Farmer</u>			18) BIRTHPLACE <u>S. C.</u>	
13) Number of children born to mother, including present birth <u>3</u>			19) OCCUPATION <u>Housewife</u>	
			20) Number of children of this mother now living, including present birth <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was alive at 10-9 M. on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)(24) (Signature) Dora Peterson (25) Address of Physician or Midwife Swega J. G.

Given name added from a supplemental report

(26) Witness M. R. Rice (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed June 24 1923 (28) W. B. Raffield 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.