

## (1) PLACE OF BIRTH

County of Charleston  
 Township of Calhoun  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

No. 740  
 (For use of Local Registrar)

Registration District No. V201... Registered No. 2  
 (For use of Local Registrar)

City of ..... (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 Warrick Mae Herlong If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD girl (4) Type of Birth yes (5) Number in order of birth 1 (6) Age of mother yes (7) DATE OF BIRTH Jan. 14, 1928  
 To be answered only in case of Twin or Triplets (Month) (Day) (Year)

## FATHER.

(8) FULL NAME William M. Herlong

(9) PRESENT RESIDENCE OF FATHER Paxville, S. C.

(10) COLOR OF FATHER White (11) AGE AT LAST BIRTHDAY 34  
 (Year)

(12) BIRTHPLACE Paxville, S. C.

(13) OCCUPATION Mechanic

(14) Number of children born to mother, including present birth 1

## MOTHER.

(15) FULL NAME Warrick M. Lead

(16) PRESENT RESIDENCE OF MOTHER Paxville, S. C.

(17) COLOR OF MOTHER White (18) AGE AT LAST BIRTHDAY 30  
 (Year)

(19) BIRTHPLACE Paxville, S. C.

(20) OCCUPATION Housekeeper

(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 alive at 8 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Wm. W. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician

Paxville S. C.

Given name added from a supplemental report

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

(27) Date Feb. 19, 1928 (28) C. J. Quinn Local Registrar

19 .....

Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of children before the fifth month of pregnancy.