

## (1) PLACE OF BIRTH

County of Wayne  
 Township of Wetzel  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St.; .... Ward)

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
**37858**

Registration District No. 4109 Registered No. 68  
 (For use of Local Registrar)

## (2) Full Name of Child

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

3 SEX OR GENDER <u>girl</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>Nov 21 1923</u>
FATHER.			MOTHER.	
8 FULL NAME <u>Willie Marion</u>			10 NAME BEFORE MARRIAGE <u>Bulah Huggins</u>	
9 PRESENT POSTOFFICE OF FATHER <u>Hartsville S.C.</u>			11 PRESENT POSTOFFICE OF MOTHER <u>Hartsville S.C.</u>	
12 COLOR OR RACE <u>W</u>	11 AGE AT LAST BIRTHDAY (Years) <u>22</u>	17 AGE AT LAST BIRTHDAY (Years) <u>25</u>		
13 BIRTHPLACE <u>Portsmouth Va</u>			16 BIRTHPLACE <u>S.C.</u>	
14 OCCUPATION <u>farmer</u>			18 OCCUPATION <u>domestic</u>	
20 Number of children born to mother, including present birth <u>2</u>			21 Number of children of this mother now living, including present birth <u>1</u>	

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Willie Marion

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed Nov 22 1923 (28) Benj. Sanders 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.