

PLACE OF BIRTH

City of Wilmington;
County of Smithville;
or
Town of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

39426

Registration District No 3306 Registered No. 60
(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.)

Full Name of Child Edith Coward If child is not yet named, make supplemental report as directed

(4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? YCS (7) DATE OF BIRTH Nov. 14 19 22
(Name of Month) (Day) (Year)

FATHER.

Full Name Sam Coward;

Present Postoffice of Father Kellock, S.C.

Color White, (11) AGE AT LAST BIRTHDAY 40
(Years)

Birthplace S.C.

Occupation Farmer;

Number of children born to mother including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Liney Parker;

(15) PRESENT POSTOFFICE OF MOTHER Kellock, S.C.

(16) COLOR OR RACE White, (17) AGE AT LAST BIRTHDAY 35
(Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION House Work;

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was at 4 P.M.,
on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) T. S. Funderburk;

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Charleston, S.C.

Same name added from a supplemental report

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

(27) Filed NOV. 20 / 19 22 (28) M. J. P. R. 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.

Registrar Only

4
(Year)

Ward)

ed, make directed

2
(Year)

S.C.

(Year)

S.C.

A.M.,
or P.M.)

to
Midwife

ell S.C.

M.
Registrar.

Return.