

(1) PLACE OF BIRTH

County of GconerTownship of Senecaor
Inc. Town ofor
City of

(No.)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.) St. Ward)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

46982

Registration District No. 3504Registered No. 2
(For use of Local Registrar)(2) Full Name of Child Joseph Eugene Walker

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

(3) BOY OR GIRL? boy(4) Twin or Triplet? one(5) Number in order of birth 10th(6) Are Parents Married? yes(7) DATE OF BIRTH Jan 1, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME H. Eugene Walker(9) PRESENT POSTOFFICE OF FATHER Seneca R.F.D.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40
(Years)(12) BIRTHPLACE Anderson County(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 11

MOTHER.

(14) NAME BEFORE MARRIAGE Kattie Morris(15) PRESENT POSTOFFICE OF MOTHER Seneca R.F.D.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 35
(Years)(18) BIRTHPLACE Anderson County(19) OCCUPATION Wife(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 1:20 am.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. D. Strickland

(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 Jan 2 1916(28) J. E. Hopkins
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.

MARRIAGE RECORDS, WITH UNFOLDING FORM—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 McCaw, of Columbia