

(1) PLACE OF BIRTH

County of Lancaster

Township of

or
Inc. Town ofor
City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthFile No. - For State Registrar Only
21229Registration District No. 108 Registered No. 225

(For use of Local Registrar)

(2) Full Name of Child William Allen KingIf child is not yet named, make
supplemental report as directed

1. BOY OR GIRL <u>Boy</u>	2. Twin or Triplet To be answered only in event of Twin or Triplet	3. Number in order of birth	4. Age of Child at Birth	5. DATE OF BIRTH <u>7/15/23</u> (Month) (Day) (Year)
FATHER		MOTHER		
6. NAME OF FATHER <u>Lawford Hughes</u>		7. NAME OF MOTHER <u>Edna Gilbert</u>		
8. PLACE OF BIRTH OF FATHER <u>Lancaster S.C.</u>		9. PLACE OF BIRTH OF MOTHER <u>Lancaster S.C.</u>		
10. COLOR OF FATHER <u>Wh.</u>		11. AGE AT LAST BIRTHDAY <u>32</u> (Year)		
12. BIRTHPLACE OF FATHER <u>Lancaster S.C.</u>		13. BIRTHPLACE OF MOTHER <u>Lancaster S.C.</u>		
14. OCCUPATION OF FATHER <u>Iron work</u>		15. OCCUPATION OF MOTHER <u>House work</u>		
16. Number of children born to mother, including present birth <u>3</u>		17. Number of children of this mother now living, including present birth <u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated. (Sign A. M. or P. M.)(21) (Signature) H. M. Swartz

(22) State whether Physician or Midwife

(23) Address of Physician or Midwife
Greenville

Given name added from a supplemental report

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

(25) Date July 15, 1923 (26) A. J. Mackey 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.