

Form No. 1

(1) PLACE OF BIRTH

County of DorchesterTownship of Roger

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

10934

Registration District No. 1705 Registered No. 25
(For use of Local Registrar)

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

(2) Full Name of Child William Haynes

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>1</u>	(5) Number in order of birth <u>8</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>July 23 22</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Edd Haynes(9) PRESENT POSTOFFICE Reesewille S.C.(10) COLOR OR RACE Neg. O (11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Poozer(15) PRESENT POSTOFFICE OF MOTHER Reesewille S.C.(16) COLOR OR RACE Neg. O (17) AGE AT LAST BIRTHDAY 25 (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive S.P. at Reesewille S.C. on the date above stated. (Born live or stillborn) (Hour A. M. or P. M.)(23) (Signature) Lucinda Russell(24) State whether Physician or Midwife Midwife Address of Physician or Midwife Reesewille S.C.

Given name added from a supplemental report

(25) Witness E. O. Glendon

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

(19) Registrar

(27) Filed July 26 22 (28) 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.