

MARGIN RESERVED FOR BINDING.  
 WRITE PLAINLY. WITH UNFADING INK.—THIS IS A PERMANENT RECORD.  
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and make the  
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 8

## (1) PLACE OF BIRTH

County of Shelby  
 Township of Reidsville  
 or  
 Inc. Town of .....

# CERTIFICATE OF BIRTH

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

Registration District No. 11007 Registered No. 24  
 (For use of Local Registrar)

City of ..... (No. ....) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 (2) Full Name of Child William Lee Ray Jr. If child is not yet named, make supplemental report as directed

(3) SEX OR  
GIRL(4) Twin  
or Triplet(5) Number in  
order of birth  
To be answered only in case of Twin or Triplet(6) Are  
Parents  
Married(7) DATE OF  
BIRTH Oct 23, 1923  
(Name of Month) (Day) (Year)

## MOTHER.

(8) FULL  
NAME(9) PRESENT  
POSTOFFICE  
OF FATHER(10) COLOR  
OR  
RACE

(12) BIRTHPLACE

(13) OCCUPATION

## FATHER.

(11) AGE AT LAST  
BIRTHDAY(14) NAME BEFORE  
MARRIAGE(15) PRESENT  
POSTOFFICE  
OF MOTHER(16) COLOR  
OR  
RACE

(18) BIRTHPLACE

(19) OCCUPATION

(17) AGE AT LAST  
BIRTHDAY(21) Number of children of this mother  
now living, including present birth(20) Number of children born to  
mother, including present birth

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

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

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplement  
 report

(26) Witness

(Signature of Witness necessary only  
 when question 23 is answered "no")

(27) Filed

1924 (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.