

## (1) PLACE OF BIRTH

County of UnionTownship of S. C. 11Inc. Town of Union CountyCity of Union

(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 Health

File No. - For State Registrar Only

30442

Registration District No. 42.06 Registered No. 38  
(For use of Local Registrar)(2) Full Name of Child J. Roy List If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy (4) Type of Triplet None (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Sept 24 1923  
(Name of Month) (Day) (Year)

FATHER			MOTHER		
(8) FULL NAME	<u>Emalie List</u>	(14) NAME BEFORE MARRIAGE	<u>Lillie Goodlock</u>		
(9) PRESENT POSTOFFICE OF FATHER	<u>Union S. C.</u>	(15) PRESENT POSTOFFICE OF MOTHER	<u>Union S. C.</u>		
(10) COLOR OR RACE	<u>Col.</u>	(16) COLOR OR RACE	<u>Col.</u>		
(11) AGE AT LAST BIRTHDAY	<u>20</u> (Years)	(17) AGE AT LAST BIRTHDAY	<u>20</u> (Years)		
(12) BIRTHPLACE	<u>Union S. C. R. 5. 3.</u>	(18) BIRTHPLACE	<u>Union S. C. R. 5. P. 47</u>		
(13) OCCUPATION	<u>Farming</u>	(19) OCCUPATION	<u>Farming</u>		
(20) Number of children born to mother, including present birth	<u>1 child 24 Sept</u>	(21) Number of children of this mother now living, including present birth	<u>1 child</u>		

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Matilda List at Union S. C. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Born live 4 o'clock P. M.  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife R. 5. Box Union S. C.(26) Witness Emalie List - Mother  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Oct. 8 1923 (28) W. J. Hallman Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.