

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

Registration District No. 49-2

Registered No. 3420  
(For use of Local Registrar)

(1) Full Name of Child

Sex Boy Race White Age 2 Date of Birth Sept 14 1943  
(If child is not yet named, make supplemental report as directed)

FATHER  
(1) Name John Franklin Kiser  
(2) Address York SC  
(3) Color White (4) Age at last birthday 30  
(5) Birthplace Rutherford, N.C.  
(6) Occupation Mill Operator  
(7) Number of children born to mother, including present one 4

MOTHER  
(1) Name before marriage Lila Jeanette Freeman  
(2) Present address of mother York SC  
(3) Color White (4) Age at last birthday 22  
(5) Birthplace York Co. S.C.  
(6) Occupation Housewife  
(7) Number of children of this mother now living, including present one 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE  
(28) I hereby certify that I attended the birth of this child, who was alive on the date above stated.  
(29) (Signature) J. D. McDaniel  
(30) State whether Physician or Midwife Midwife (31) Address of Physician or Midwife York SC

Given name added from a supplemental report  
(32) Witness (Signature of Witness necessary only when question 28 is signed by mark)  
(33) Signed Nov-10 1943 (34) 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.

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