

(1) PLACE OF BIRTH

County of Rowles  
Township of Laura  
or  
Inc. Town of  
or  
City of

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

Registration District 3904

File No.—For State Registrar Only

11822

Registered No. 37  
(For use of Local Registrar)

(No. 1 St. ..... Ward .....)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Max Weiss (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married Yes (7) DATE OF BIRTH Nov 17 25  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME William Evans  
(9) PRESENT POSTOFFICE OF FATHER Laura S Ct #3  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 45 (Year)  
(12) BIRTHPLACE Laura Co SC  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 10

MOTHER  
(14) NAME BEFORE MARRIAGE Sally Davis  
(15) PRESENT POSTOFFICE OF MOTHER Laura S Ct #3  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36 (Year)  
(18) BIRTHPLACE Laura Co SC  
(19) OCCUPATION Domestic  
(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OF MIDWIFE

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

(23) (Signature) William D. Davis  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Laura Co

Given name added from a supplemental report  
.....  
19  
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by a male) .....  
(27) Filed ..... 19 25 (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.

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