Form No. 1

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
5237

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

Registration District No. 44022 Registered No. 22
(For use of Local Registrar)

(No. ..... St.; ..... Ward)

(2) Full Name of Child Lennie A. Hurd

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

(3) BOY OR GIRL | (4) Twin or Triplet? | (5) Number in order of birth 5 | (6) Are Parents Married? yes | (7) DATE OF BIRTH Feb 2 1923
To be answered only in event of Twins or Triplets
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Earl Hurd
(9) PRESENT POSTOFFICE OF FATHER Cherokee R.F.D. 2
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Farming
(14) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Lyda Burt
(15) PRESENT POSTOFFICE OF MOTHER Cherokee R.F.D. 2
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 23 (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Housekeeping
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was B. Alive at 9 P. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. L. Littlejohn
(24) Title whether Physician or Midwife: Physician
(25) Address of Physician or Midwife: Cherokee

Given name added from a supplemental report
Jessie Fairey
May 1 to ..... 1923.
Registrar

(26) Witness .....
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 3/10 1923 (28) J. Blackwell
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.

MARRIAGE REGISTERED FROM MINISTERS. WHITE PEOPLE. WHITE & NEGRO MEN—THIS IS A PENALTY OF $100 OR IMPRISONMENT. IF THE PARTIES ARE A REPORT OF BOARD FOR DATE CERTIFICATE. FIRST—BRIDE. No. 1. THE GROOM. No. 2. Do not write in this space.