

(1) PLACE OF BIRTH

County of RichmondTownship of Barley

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 2702 Registered No. 7

(For use of Local Registrar)

(No. 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 Rupert Turner

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

(3) BOY OR GIRL Boy(4) Twin or Triplet
To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH Feb 18 1923

(Name of Month) (Day) (Year)

FATHER,

(8) FULL NAME Rupert Turner(9) PRESENT POSTOFFICE OF FATHER Union Hill(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE IL

(13) OCCUPATION

(20) Number of children born to mother, including present birth 1

MOTHER,

(14) NAME BEFORE MARRIAGE Lucy Turner(15) PRESENT POSTOFFICE OF MOTHER Union Hill(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 27 (Years)(18) BIRTHPLACE IL(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was White at 11 2 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. P. Ball

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Physician Barley

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed "Mark")

(27) Date Mar 2 1923 (28) J. H. Wyatt 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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IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.

Division of Statistics, Columbia, S. C.