

(1) PLACE OF BIRTH

County of YorkTownship of Yorkor
Inc. Town ofor
City of

(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

32775

Registration District No. 4408Registered No. 142
(For use of Local Registrar)

Only

(2) Full Name of Child Edward Lee, Jr.

{ 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

To be answered only in case of twin or triplet

(6) Are Parents Married? Yes(7) DATE OF BIRTH Sept. 11, 1924

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Edward Lee(9) PRESENT POSTOFFICE OF FATHER Gastonia, N.C.(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22 (Years)(12) BIRTHPLACE York Co. S.C.(13) OCCUPATION Laborer(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Wilson(15) PRESENT POSTOFFICE OF MOTHER York, S.C.(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 18 (Years)(18) BIRTHPLACE York Co. S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6:30 a. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Philip C. Williams(24) State whether Physician or Midwife (25) Address of Physician or Midwife York, S.C.

Given name added from a supplemental report

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Registrar

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

(27) Filed Sept. 14, 1924 (28) Philip C. Williams 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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FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

Law of Columbia

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