

(1) PLACE OF BIRTH

County of

Township of

or  
Loc. 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

16821

Registered No. 4009  
(For use of Local Registrar)

(2) Full Name of Child James L. Gentry

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

(6) Are Parents Married?

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

FATHER

MOTHER

(8) FULL NAME

(14) NAME BEFORE MARRIAGE

(9) PRESENT POSTOFFICE OF FATHER

(15) PRESENT POSTOFFICE OF MOTHER

(16) COLOR OR RACE

(17) AGE AT LAST BIRTHDAY

(18) COLOR OR RACE

(19) AGE AT LAST BIRTHDAY

(20) BIRTHPLACE

(21) BIRTHPLACE

(22) OCCUPATION

(23) OCCUPATION

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

(25) Number of children of this mother now living, including present birth

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(26) I hereby certify that I attended the birth of this child, who was *alive* at *10 P.* M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(27) (Signature)

(28) State whether Physician or Midwife (29) Address of Physician or Midwife

Given name added from a supplemental report

(30) Witness

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

191...

Registrar

(31) Filed

May 4, 1922

(32)

Chas. L. Boyler

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.

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.

# AFFIDAVIT

STATE OF South Carolina

COUNTY OF Greenville

Name of child. James Posey Gentry.  
 Name of mother prior to marriage. Aileen Alexander.  
 Date of birth. May 13, 1922.  
 place of birth. Woodruff, S.C.  
Dr. D.D. Alexander.  
 Local Registrar. Chas. I Boyter.  
 Race... White.

Personally appeared before me Mrs. Aleen Alexander Gentry  
 who first being duly sworn says that she is the mother  
 of James Posey Gentry, who was born at Woodruff, S.C.  
 on May 13,, 1922; that the birth records in the office of the Clerk of  
 Court for Spartanburg County, South Carolina, are deficient in the following manner, to-wit:  
That full name of child appears in the birth record as James Gentry  
which should be James Posey Gentry.

that this affidavit is made for the purpose of correcting the errors as herein stated.

Sworn to before me this 9th  
 day of April, 1941

C.B. Altaway  
 Notary Public for S. C.

Mrs. Aleen Alexander Gentry

*[Handwritten signatures and stamps on the right margin]*

hospital or  
 ?  
 record only is  
 CR.  
 uff  
 AGE AT LA  
 BIRTHDAY  
 uff  
 1:....  
 IFICATE O  
 attended the  
 ted.  
 (23)  
 (24)  
 plimen-  
 191....  
 registrar  
 physician or  
 must not be  
 even once, 1