

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
 M. B.—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 4.

(1) PLACE OF BIRTH

County of Chesterfield

Township of Jefferson

Inc. Town of Jefferson

City of Jefferson

(No. St. Ward) (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

3438

Registration District No. 124 Registered No. 124
 (For use of Local Registrar)

(2) Full Name of Child Daniel H. Langford

not yet named, make supplemental report as directed

3 BOY OR GIRL <u>boy</u>	4 Twin or Triplet <u>To be answered only in event of Twins or Triplets</u>	5 Number in order of birth	6 Are Parents Married <u>yes</u>	7 DATE OF BIRTH <u>Feb. 27, 1925</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
8 FULL NAME <u>Daniel H. Langford</u>			14 NAME BEFORE MARRIAGE <u>Agnes Foga</u>	
9 PRESENT POSTOFFICE OF FATHER <u>Jefferson SC</u>			15 PRESENT POSTOFFICE OF MOTHER <u>Jefferson SC</u>	
10 COLOR OR RACE <u>White</u>	11 AGE AT LAST BIRTHDAY <u>20</u> (Years)	16 COLOR OR RACE <u>White</u>	17 AGE AT LAST BIRTHDAY <u>25</u> (Years)	
12 BIRTHPLACE <u>SC</u>			18 BIRTHPLACE <u>SC</u>	
13 OCCUPATION <u>Carpenter</u>			19 OCCUPATION <u>Housewife</u>	
20 Number of children born to mother, including present birth <u>2</u>			21 Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 3 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Paul E. Thomas

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Jefferson SC

Given name added from a supplemental report

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

(27) Filed 3-16-25 (28) A. J. Anderson 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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