

(1) PLACE OF BIRTH

County of AlbionTownship of Wilson

Inc. Town of

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

19722

Registration District No. 4603 Registered No. 28

(For use of Local Registrar)

(2) Full Name of Child Harry Devor Jr. If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Bo</u>	(4) Twin or Triplet? <u>No</u> To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 21 1925</u> (Month) (Day) (Year)
FATHER. <u>Devor</u>		MOTHER. <u>Miriam Mauer</u>		
(8) FULL NAME <u>Harry Devor</u>	(14) NAME BEFORE MARRIAGE	(15) PRESENT POSTOFFICE OF MOTHER <u>Barton, SC</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Barton, SC</u>	(10) PRESENT POSTOFFICE OF FATHER	(16) COLOR OR RACE <u>Colored</u>	(17) AGE AT LAST BIRTHDAY <u>30</u> (Year)	(18) BIRTHPLACE <u>Albion, S.C.</u>
(11) COLOR OR RACE <u>Colored</u>	(12) AGE AT LAST BIRTHDAY <u>41</u> (Year)	(19) OCCUPATION <u>House wife</u>	(20) NUMBER OF CHILDREN OF THIS MOTHER NOW LIVING, INCLUDING PRESENT BIRTH <u>1</u>	(21) NUMBER OF CHILDREN OF THIS MOTHER NOW LIVING, INCLUDING PRESENT BIRTH <u>1</u>
(13) BIRTHPLACE <u>Albion, S.C.</u>	(14) OCCUPATION			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 12 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Timothy Green(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Albion, S.C.

Given name added from a supplemental report

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

(27) Filed July 11 1925 (28) 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.