

(1) PLACE OF BIRTH

County of Union
 Township of Union
 or
 Inc. Town of Monarch
 or
 City of _____

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

12304

Registration District No. 4207Registered No. 27
(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 Kubie Helen Kirby

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

3 BOY OR GIRL Girl4 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 10 23
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME Paul Eugene Kirby9 PRESENT POSTOFFICE OF FATHER Union SC10 COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)12 BIRTHPLACE Spaulding, SC13 OCCUPATION mill work20 Number of children born to mother, including present birth one

MOTHER.

(14) NAME BEFORE MARRIAGE Kubie Hunt(15) PRESENT POSTOFFICE OF MOTHER Union SC(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY _____ (Years)(18) BIRTHPLACE Franklin NC(19) OCCUPATION Mill Work Domestic(21) Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2:30 P.M., on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)(23) (Signature) J. S. Toke

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Union SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed 5 10 23(28) J. S. Toke

Local Registrar

19 _____
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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