

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Reidville
 or
 the Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
27994

Registration District No. 4007 Registered No. 61
 (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 Turner Davis If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? Twin (5) Number in order of birth 1st (6) Are Parents Married? yes (7) DATE OF BIRTH June 27, 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Hyderick Davis

(9) PRESENT POSTOFFICE OF FATHER Reidville

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27
 (Years)

(12) BIRTHPLACE N.C.

(13) OCCUPATION Mechanic

(14) Number of children born to father, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Ida Belle Patton

(15) PRESENT POSTOFFICE OF MOTHER Reidville

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 23
 (Years)

(18) BIRTHPLACE R.C.

(19) OCCUPATION Housework

(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 5 A. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) D. Wood
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Reidville

Given name added from a supplemental report

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

(27) Filed Aug 31, 1922 (28) W. H. Wilson
 Registrar 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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