

## (1) PLACE OF BIRTH

County of Lexington  
 Township of Saluda  
 of  
 Inc. Town of .....  
 of  
 City of ..... (No. .... St. .... Ward)

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

33076

Registration District No. 311Registered No. 43  
(For use of Local Registrar)(2) Full Name of Child Elton Virginia

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

(1) BOY OR GIRL <u>Boy</u>	(2) Twin or Triplet To be answered only in event of Twin or Triplet	(3) Number in order of birth	(4) Are Parents Married <u>yes</u>	(5) DATE OF BIRTH <u>Sept. 14, 1923</u> (Month of Year) (Day) (Year)
FATHER.			MOTHER.	
(6) FULL NAME <u>John Alvin E. King</u>			(14) NAME BEFORE MARRIAGE <u>Pearl Irene Huffstetter</u>	
(7) PRESENT POSTOFFICE OF FATHER <u>Chapin</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Chapin</u>	
(8) COLOR OR RACE <u>white</u>	(9) AGE AT LAST BIRTHDAY <u>27</u> (Year)	(10) COLOR OR RACE <u>white</u>	(11) AGE AT LAST BIRTHDAY <u>24</u> (Year)	
(12) BIRTHPLACE <u>S.C.</u>			(13) BIRTHPLACE <u>S.C.</u>	
(14) OCCUPATION <u>Farming</u>			(15) OCCUPATION <u>House wife</u>	
(16) Number of children born to mother, including present birth <u>1</u>			(17) Number of children of this mother now living, including present birth <u>1</u>	

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(18) I hereby certify that I attended the birth of this child, who was Born alive at 9.0 M., on the date above stated. (Each alive or stillborn Hour, M. or P. M.)

(19) (Signature) John E. King

(20) State whether Physician or Midwife

(21) Address of Physician or Midwife Chapin

Given name added from a supplemental report

(22) Witness

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

(23) Filed Oct 15, 1923

(24)

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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