

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

71283

(1) PLACE OF BIRTH

County of *Anderson*Township of *Honeabath*or
Inc. Town ofor
City ofRegistration District No. *301*Registered No. *104*
(For use of Local Registrar)

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

William Harvey Simpson child is not yet named, make supplemental report as directed(3) BOY OR
GIRL? *boy*(4) Twin
or Triplet?(5) Number in
order of birth(6) Are
Parents
Married? *yes*(7) DATE OF
BIRTH*Aug 10, 1916*
(Name of Month) (Day) (Year)

FATHER.

(5) FULL
NAME*Henry P. Simpson*(6) PRESENT
POSTOFFICE
OF FATHER*Honeabath SC*(10) COLOR
OR
RACE *white*(11) AGE AT LAST
BIRTHDAY*39*
(Years)

(12) BIRTHPLACE

Anderson Co

(13) OCCUPATION

farmer(20) Number of children born to
mother, including present birth*35*

MOTHER.

(14) NAME BEFORE
MARRIAGE*Lela M. McClelland*(15) PRESENT
POSTOFFICE
OF MOTHER*Honeabath SC*(16) COLOR
OR
RACE *White*(17) AGE AT LAST
BIRTHDAY*33*
(Years)

(18) BIRTHPLACE

Anderson Co.

(19) OCCUPATION

housewife(21) Number of children of this mother
now living, including present birth*4*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *Alive* at *4 P.* M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature)

W. P. Harvey, M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

*Physician**Belton Co.*Given name added from a supplement-
tal report

(26) Witness

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

Registrar

(27) Filed

Sept 1, 1916

(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.)