

## (1) PLACE OF BIRTH

County of MarionTownship of Tanneror  
Inc. Town of .....or  
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

No. for State Registrar only  
**11284**Registration District No. 32. P. 7 Registered No. 14  
(For use of Local Registrar)

## (2) Full Name of Child

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

(3) BOY OR GIRL

Boy

(4) 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

March 24 1923  
(Month) (Day) (Year)

## FATHER.

(8) FULL NAME

James McInnes

(9) PRESENT POSTOFFICE OF FATHER

Dallies S.C. R.F.D.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

40  
(Years)

(12) BIRTHPLACE

Marion Co. S.C.

(13) OCCUPATION

Farm & Lumberman

## MOTHER.

(14) NAME BEFORE MARRIAGE

Amelia May Brown

(15) PRESENT POSTOFFICE OF MOTHER

Dallies S.C. R.F.D.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

29  
(Years)

(18) BIRTHPLACE

Marion Co. S.C.

(19) OCCUPATION

Housewife

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

7

(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 born alive at 8:00 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

May 11 1923(28) J. L. Dill  
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.